

Factors associated with the detection of the signs of child sexual abuse

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Declaration

This work is original and has not been submitted in relation to any other degree or qualification.

Signed _____

Date _____

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I would like to thank the Psychology Department at the University of Chester for allowing me to contribute to a departmental project.

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Supervision Log

Name: Nick Goddard

Supervisor: Clea Wright

11-01-18 14:00 – Initial conversation to discuss the methodology and design of the experiment, together with theoretical considerations and background reading.

23-01-18 14:30 – Continued to discuss and finalised the methodology, which can now be used to create the ethics application.

01-03-18 13:15 – Draft ethics application discussed, and feedback received. A number of minor amendments suggested, which were implemented subsequent to the meeting and approved. Literature review discussed.

28-03-18 09:00 – Feedback on conditionally approved ethics form discussed, as were the amendments needed to satisfy the comments made by the reviewers. A rough schedule for production of each section of the dissertation created. Subsequent to the meeting, e-mail conversation to discuss adding amendments to the ethics application to broaden scope of survey advertisement and ensure that the responses to the survey were saved whilst still meeting ethical requirements.

19-04-18 12:00 – Feedback on fully approved ethics form discussed. Outline of introduction discussed and feedback on structure and content of introduction given.

05-06-2018 13:30 – Discussed recruitment, and the ethics amendment. Structure of thesis and method discussed.

18-07-18 14:30 – Agreed preliminary cut off-date for recruitment (5/8 depending on how data collection goes). Preliminary discussion of the result section. Discussed second ethics amendment.

03-08-18 15:00 – Final cut-off date for data collection (5/8) agreed. Discussed analysis and agreed to run and report both the 2x3 ANOVA and non-parametric equivalent.

13-08-18 14:30 – Discussed interpretation of results. Agreed structure of the results section. Reviewed hypotheses in preparation for the discussion section.

22-08-18 15:00 – Discussed the results and the structure of the discussion section.

29-08-18 14:00 – Discussed in detail all elements of the discussion.

10-09-18 10:00 - Draft feedback. Structure of dissertation document discussed.

13-09-18 16:00 – Discussed formatting of dissertation. Skills reflection discussed in depth.

Signed:

Student

Date

Supervisor

Date

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Abstract

Child sexual abuse (CSA) is a major international societal concern, with up to 48% of women and 29% of men having experienced it, often with severe resultant psychological issues. The utility of offender management programs in reducing CSA is disputed and the reporting rate of CSA is low, so the ability to detect sexually abusive relationships between adults and children is of increased importance. However, media propagation of child sex offender stereotypes inhibits their detection. This study used a vignette-based online questionnaire to explore if the signs of abuse can be detected in a child's relationship with their football coach and if the 'dirty old man' age stereotype impacts detection. Whether adults already trained in detecting CSA rated the potential for sexual abuse differently than untrained adults in scenarios where it was included was also explored. The analyses indicated a significantly higher rating for CSA in 'abuse' scenarios than 'no-abuse' scenarios across all participants, with a large effect size. However, there was no significant difference in rating based on abuser age (none given, 19, 50). Additionally, CSA trained participants did not rate abuse scenarios significantly differently than untrained participants. Lack of trust in the media, extensive reporting of high-profile cases that did not include a stereotypically-aged sex offender, and the personal experiences of participants were considered as potential mitigating factors for the age stereotype. The focus of existing CSA training on symptoms rather than relationships is considered as a potential explanation for similar ratings between trained and untrained participants.

Introduction

Child sexual abuse (CSA) has been found and studied in at least 37 countries, across all five habitable continents and is recognised as a major international societal concern (Barth, Bermetz, Heim, Trelle, & Tonia, 2013; London, Bruck, Ceci, & Shuman, 2005; Pereda, Guilera, Forns, & Gómez-Benito, 2009a). Whilst recent estimates indicate that convictions for sex offenses in general accounted for only 5% of crime overall, (Drake & Bamoski, 2006), and despite a purported fall the rates of reported child sexual abuse, at least in the USA (Drake & Bamoski, 2006; Levenson, Brannon, Fortney, & Baker, 2007; Wiseman, 2014), more than half of all reported sex offenses and over 80% of sex offender convictions relate to child sexual abuse (Canadian Centre for Child Protection, 2014; Drake & Bamoski, 2006). That said, figures for the true prevalence of CSA are not easy to obtain (Richards, 2011), not least because reporting rates are low, with only around 33% of CSA survivors typically disclosing the abuse (London et al., 2005). In addition, different countries and even different jurisdictions within countries, often have different legal definitions of what constitutes CSA, discussed more fully below, and different procedures for officially recording child sex abuse statistics (Goldman & Padayachi, 2000; London et al., 2005). Indeed, even different studies within the same country can produce different estimates of the prevalence of CSA (Radford, Corral, Bradley, & Fisher, 2013), although a variation in methodology between studies could also be a contributing factor to the lack of consistency here (Radford et al., 2013). This may go some way towards explaining why the reported prevalence of CSA across the world varies considerably across international borders but remains relatively consistent within each individual country over time (Barth et al., 2013; Pereda et al., 2009a). However, one commonality across the literature is that females tend to be exposed to CSA more than males (Radford et al., 2013), with up to 48% of women and 29% of men having experienced sexual abuse as a child, and 11% of respondents to one study reporting that the abuse took place before the age of 13 (Finkelhor, 2009; Richards, 2011).

It is a disadvantage, when attempting to quantify prevalence rates, that whilst CSA has received a lot of attention from researchers, there is little agreement on the exact definition of CSA (Finkelhor, 1999; Goldman & Padayachi, 2000; Pereda et al., 2009a). Variations in the definition of child sexual abuse tend to centre around a number of core issues. One such issue is the age of the child at the time of the abuse, with the demarcation between childhood and adulthood varying between 12 and 18 years old across different countries (Goldman & Padayachi, 2000; Pereda, Guilera, Forns, & Gómez-Benito, 2009b). The age of the offender would also seem to be a point of contention. Some researchers would note that an offender simply needed to be classed as an adult (Finkelhor & Araji, 1986; Finkelhor, 1999). Others would require (or note) an age gap between offender and survivor (where the offender was older), whether the gap was somewhat nebulously defined, (Follette, Polusny, Bechtle, & Naugle, 1996; Goldman & Padayachi, 2000; Rind, Tromovitch, & Bauserman, 1998) or whether the offender had to be a fixed number of years older than the survivor (Pereda et al., 2009a). If the offender and survivor were around the same age at the time of the abuse, it would only be considered child sexual abuse if coercion was involved (Pereda et al., 2009a; Rind et al., 1998). Further, few studies distinguish between wanted and unwanted sexual contact (Goldman & Padayachi, 2000; Rind et al., 1998). This study explored if the signs of CSA could be detected in scenarios where it is present and if the detection of CSA was impacted by varying the age of the potential abuser. This study also explored if detection rates varied between adults trained in detecting the signs of CSA and those who were not. Given the variable definitions of CSA, it would perhaps be prudent to use a broad, all-encompassing definition here. However, if such a broad definition was used, it would be somewhat problematic to, for example, differentiate between consenting sexual activity between a 17-year-old and an 18-year-old in a committed relationship and the interfamilial abuse of a prepubertal child, as both would be considered child sexual abuse (Rind et al., 1998).

The definition of what acts constitute CSA is also subject to variation. Whilst sexual contact such as sexual kissing, the fondling of genitalia and penetrative intercourse is usually included in the operational definition of child sex abuse (Canadian Centre for Child Protection, 2014; Follette et al., 1996; Hillberg, Hamilton-Giachritsis, & Dixon, 2011) non-contact offenses such as exhibitionism and exposure to pornography are also sometimes included (Canadian Centre for Child Protection, 2014; Goldman & Padayachi, 2000; Hillberg et al., 2011; Rind et al., 1998). Indeed, crude sexual comments from same-age peers have previously been included in the definition of child sex abuse (London et al., 2005). London et al. (2005) argue that broadening the definition of child sexual abuse in such a way would drive up disclosure rates and hence increase reported prevalence. However, Pereda et al. (2009b) note that their meta-analysis did not support a significant association between the breadth of definition and reported prevalence rates. Pereda et al. (2009b) suggest that any difference in prevalence rates is more likely due to the different methodological approaches employed, rather than any actual difference in the samples used. Perhaps the issue of how the data on CSA is collected has some relevance here. Rellini and Meston (2007) note that the phrasing of questions surrounding CSA can have an impact on the response. Asking a person if they suffered sexual abuse as a child would yield different results to asking if they had had sexual contact with someone older when they were under 16, as it would require them to self-identify as sexually abused.

Regardless of how CSA is defined legally or within psychological literature, CSA can have profound consequences for survivors (Topping & Barron, 2009), which can manifest as clinical mental health issues such as depression and PTSD, suicide ideation, eating disorders, substance abuse, social stigma such as victim-blaming and survivors may be sexually assaulted as adults, or develop a sexual dysfunction themselves (Follette et al., 1996; Kennedy & Prock, 2016; Marshall, Laws, & Barbaree, 1990; Richards, 2011; Rind et al., 1998). Some survivors of different forms of abuse,

including CSA, can sometimes go on to unwittingly cultivate intimate relationships with child sex offenders when they become adults (Shannon, Pearce, & Swarbrick, 2013). Rind et al. (1998), however, suggest that such outcomes are not inevitable and argue against a direct correlation, positing that the family environment of the abuse survivor is a potential confounding factor. Indeed, the majority of CSA survivors will not go on to perpetrate further sexual assaults; CSA survivors who are in a relationship with a child sex offender (CSO) are not usually aware of the abusive nature of their partner and the majority of sex offenders, as a whole, were not sexually abused as children (Duncan, 2012; Jenkins, 1998; Levenson et al., 2007; Shackley, Weiner, Day, & Willis, 2014; Shannon et al., 2013). CSA can also be impactful to those closely related to the abused child. Partners of CSOs (whether they were abused themselves or not) are often unaware that the abuse has taken place until it is investigated, but are treated with suspicion by the authorities and, indeed, by their personal support network, who may hold the notion that the partner should have known and/or done more to protect the child and, as a consequence, withhold from the partner the support they need at such a distressing time (McLaren, 2012; Shannon et al., 2013).

It is perhaps because of the profound consequences that survivors of CSA and those close to them suffer that child sex offenders (CSOs) are generally viewed very negatively, certainly in a more negative way than perpetrators of other sex crimes (Jung, Jamieson, Buro, & Decesare, 2012; Shannon et al., 2013; Thakker, 2012). However, the media would seem to bear some responsibility for shaping the attitude of the public towards CSOs (Jewkes & Wykes, 2012). When child sex offences are reported, the media often propagates stereotypes of CSOs, perpetuates myths and misrepresents facts, which contributes to the misconceptions about CSOs that are held by the general public (Cohen, 2002; Gavin, 2005; Wolak, Finkelhor, Mitchell, & Ybarra, 2008). So pervasive is the media in this matter that it can often impact legal policy for sex offenders, such as the implementation of community notification requirements,

restrictions on where sex offenders can live and stiff sentencing laws (Sahlstrom & Jeglic, 2008). The media can also affect the outcome of CSA trials, with members of the jury potentially having already decided the guilt or innocence of the defendant before the trial begins, thanks to extensive media coverage and regular opinion pieces from legal professionals (Klein, Tolson, & Longo, 2013). Indeed, child sex offenders tend to be feared more by the general public than any other kind of sex offender, (Kernsmith, Craun, & Foster, 2009; Levenson et al., 2007). Perhaps more importantly however, the generally held stereotypical views of sex offenders potentially makes it more likely for a sex offender, particularly a CSO to go unnoticed (Sanghara & Wilson, 2006; Thakker, 2012).

What could potentially be described as the most damaging misconception about child sex offenders, from the perspective of detecting signs of abuse, is that the offender is unknown to the victim (Finkelhor, 2009; Fuselier, Durham, & Wurtele, 2002; Greer, 2011; Jewkes & Wykes, 2012; Sanghara & Wilson, 2006; Serisier, 2017) and that victims are sought out either in public places where children congregate (Serisier, 2017) or online in websites popular with children and teens (Wolak et al., 2008). Despite the tendency of the media to portray the view that CSA is only committed by strangers (Jewkes & Wykes, 2012), up to 95% of CSA is committed by someone known to the child, more than a third of whom are a family member (Canadian Centre for Child Protection, 2014; Jewkes & Wykes, 2012; Maguire & Singer, 2010). As a result, offenses committed within the family are less known and barely reported upon (Jewkes & Wykes, 2012).

Another potentially damaging misconception is that child sex offenders are older men, the stereotypical 'dirty old man' (Fuselier et al., 2002; Sanghara & Wilson, 2006), whereas, child sex offenders can be of any age (Elliot, Browne, & Kilcoyne, 1995; Sanghara & Wilson, 2006) and up to half of all reported child sex abuse is committed by juvenile offenders (Sahlstrom & Jeglic, 2008; Sanghara & Wilson, 2006).

This figure rises to almost two-thirds when incidents are included that are not officially reported (Radford et al., 2013), which could potentially indicate a lower preference for reporting or prosecuting when the offender is under 18. So pervasive is the age stereotype that whilst recent studies indicated that the public certainly favoured legal sanctions for younger offenders (Sahlstrom & Jeglic, 2008), there was a preference for harsher punishment for older offenders, as they were somehow seen as more serious crimes (King & Roberts, 2015).

Further damaging misconceptions as to the nature of child sex offenders centre around the notion that all sex offenders are a homogeneous group with a pre-defined sex (male), sexual preference (not heterosexual), age (older), marital status (single, or at least unmarried), social class (lower), level of education (low), social aptitude (low), and pose an overall risk to the community, with high rates of re-offending that include ever more serious offenses and, as a result, are beyond redemption and unable to be rehabilitated (Calvert & Munsie-Benson, 1999; Duncan, 2012; Finkelhor, 2009; Fuselier et al., 2002; Gakhal & Brown, 2011; Gavin, 2005; Sanghara & Wilson, 2006; Serisier, 2017). Indeed, it is perhaps because this stereotype of a one-size-fits-all sex offender is so pervasive and because high numbers of sex offenses involve children, that the terms 'sex offender' and 'child sex offender' are also at times conflated in the literature (see Hudson, Ward, & McCormack, 1999 and Maguire & Singer, 2010 for examples).

In fact, child sex offenders are a heterogeneous group that are nevertheless primarily heterosexual, are able to establish and maintain a sexual relationship with an adult and, indeed, can often be found in long-term committed relationships (Canadian Centre for Child Protection, 2014; Fuselier et al., 2002; Serisier, 2017). The intelligence of a child sex offender is no different from that of a member of the general public (Sanghara & Wilson, 2006) and child sex offenders have low recidivism rates, typically 5-20%, measured 3-6 years after being released from prison, compared to around 50% for perpetrators of other crimes (Drake & Bamoski, 2006; Quayle & Sinclair, 2012).

Although, Thakker (2012) reports recidivism rates for child sex offenders who come from outside of the family to be much higher. It should be noted however that recidivism rates are measured using subsequent offender convictions and the reporting rate for CSA is low (London et al., 2005). The number of other offenses committed by child sex offenders is also disputed. Wilson (1999) contends that child sex offenders have little interest in other crimes, which contributes to a lower re-arrest rates than for perpetrators of other crimes (Duncan, 2012; Wilson, 1999) although Hanson and Morton-Bourgon (2005) argue that while just over a third of child sex offenders re-offend, most of the offenses are unconnected to sex crimes. However, a commonality in the literature is the low rate of repeated child sex offences (Quayle & Sinclair, 2012).

There are naturally some elements of fact in the CSA stereotype. Most offenders are male (Canadian Centre for Child Protection, 2014; Sullivan, 2008) and white (Drake & Bamoski, 2006) although in some primarily female-dominated settings such as childcare, the rate of female perpetrators can rise as high as 40% (Goldman & Padayachi, 2000). Some report that CSA's tend to be withdrawn socially (Bard et al., 1987; Finkelhor, 1984; Ward & Hudson, 2001; Ward & Siegert, 2002) although others report on varied social ability within offenders (Hall & Hirschman, 1992) and Knight and Prentky (1990) report lack of social ability in only one of their four proposed taxonomic models of CSOs. Goodman-Delahunty (2014) also reports that familial offenders, a large sub-group of CSOs (Seto, 2017), tend to exhibit common characteristics such as a preference for female victims and perpetration of offending behaviour over a long period of time. Familial offenders are also usually in a long-term relationship with an adult female and in a stable job, factors generally supported to be protective against the possibility of offending (Goodman-Delahunty, 2014; Middleton, 2013).

Working with such a heterogenous group, it can be difficult to effectively model the motivations of child sex offender behaviour to enable detection. Several theories have emerged that attempt to describe the factors within an offender that lead to the

sexual abuse of a child (Ward & Siegert, 2002). Finkelhor's (1984) seminal Four Preconditions Model of Sexual Abuse is generally regarded as one of the most influential theoretical models (Palmer & Feldman, 2017; Thakker & Ward, 2012). The four preconditions were an attempt to unite the competing unifactorial theories of CSA of the time and address not just the internal processes within the offender but also the opportunity to offend (Finkelhor, 1984; Howells, 1994). All four preconditions must be met before offending behaviour can take place (Finkelhor, 1984; Thakker & Ward, 2015). The first precondition (PM1), motivation to offend, can come about either from a pre-existing sexual interest in children, lack of other sexual outlets - such as the unavailability of an adult sexual partner due to inadequate social skills, meeting an emotional need through relating to a child or a combination of any or all of these factors (Collins & Duff, 2016; Finkelhor, 1984). Finkelhor later notes that the three subfactors of the first precondition were the basis of three primary competing theories of CSA proposed in the literature prior to the publication of his precondition model (Finkelhor & Araji, 1986) and it is clear that he has attempted to knit these theories together as part of his general model. Finkelhor (1984) then argues that even with motivation, most people are inhibited against CSA, and overcoming internal inhibitors must be the second precondition (PM2) before offending behaviour can begin to express itself. The internal inhibition can be overcome by means of any number of internal factors, such as alcohol, senility and impulse disorder and/or external factors such as social tolerance of CSA and/or weak criminal sanctions against offenders (Finkelhor, 1984). The third precondition (PM3) is broadly concerned with the opportunity to offend and so there is a requirement that there is no-one to supervise or protect the child, such as the existence of an absent or ill parent, or the offender has multiple opportunities to be alone with the child (Bartels, 2017; Finkelhor, 1984). The fourth precondition (PM4) is overcoming the child's resistance to abuse (Palmer & Feldman, 2017). Finkelhor (1984) notes that professionals tend to only be in contact with children who have already been abused and claims that there are likely children who had close calls that

were able to somehow resist the abuse. Indeed, modern youth organisations seek to minimise the risk of CSA by running programs that aim to bolster the ability of children to resist the abuse (Wilson & Pence, 2017).

Whilst Finkelhor has been praised for being the first to attempt a comprehensive multi-factorial theory of CSA (Thakker & Ward, 2015; Ward & Hudson, 2001), his Precondition Model has been criticised for having been drawn from too wide a range of psychological theories and traditions, with no tangible link evident between them (Ward & Hudson, 2001) and without supporting evidence from mainstream experimental psychology (Howells, 1994; Ward & Hudson, 2001; Ward & Seigert, 2002). More recent criticism has been levelled at PM1; the described need some offenders may have to be emotionally congruent with a child, for example, was later affirmed as non-sexual (Seto, 2017), at least for non-incest offenders (Wilson, 1999), and so it is difficult to see how this would lead to CSA. Ward & Hudson (2001) also contend that individuals who are motivated to commit CSA are unlikely to be inhibited against it and posit that there must be another factor at play that would require such disinhibition, such as an internal conflict arising from competing desires. Bartels (2017) also contends that Finkelhor does not account for the second precondition with any amount of depth and posits that an offender who, in early life, fully overcame their internal inhibitions to sexually abusing a child is very different to one who is able to consciously overcome their inhibitions only when the opportunity to offend arises. Given the aforementioned stereotyping issues that hinder the identification of child sex offenders, it is likely advisable to consider that a range of methods are potentially available to child sex offenders that allow them to overcome their internal inhibitions, rather than taking a polarised viewpoint. However, Bartels' (2017) example does illustrate the difficulties Finkelhor's precondition model would pose to the development of psychological interventions designed to reduced recidivism.

However, subsequent models of sex offending, often include aspects of Finkelhor's Precondition model, albeit in a more developed form. Hall and Hirschman's (1991) Quadripartite model requires that offenders not just be sexually aroused (PM1) but to have developed deviant cognitions that allow them to overcome their inhibition against offending (PM2) and that these factors, among others, must exist in order for sex offenses to take place. In their integrated model, Marshall and Barbaree (1990) argue that sexual interest in children and a corresponding lack of inhibition against carrying out such assaults can develop from a combination of biological influences, societal factors and experiences in childhood (PM1 & PM2). Situational factors, such as opportunity to offend whilst escaping detection are also prominent in their model (PM3; Marshall & Barbaree, 1990). It should also be considered that, unlike other models of sex offending, Finkelhor's Precondition Model is focused solely on CSA (Collins & Duff, 2016; Palmer & Feldman, 2017). It has provided the foundation for a number of subsequent CSA-specific models as well as process models of grooming (Collins & Duff, 2016; Whittle, Hamilton-Giachritsis, Beech, & Collings, 2013), such as Sullivan's (2008) spiral of abuse and Craven, Brown and Gilchrist's (2006) grooming process model. Finkelhor's Precondition Model also forms the framework through which Collins & Duff's (2016) exploratory female child sex offender case study is investigated. It would seem wise therefore to base an analysis of offender characteristics on Finkelhor's Precondition Model in relation to the present study.

Despite the definitional disagreements on the nature of CSA outlined above, Finkelhor (1999) noted that there was some broad global agreement on the definition of CSA: "...sexual acts between adults and prepubertal children, between parents and their offspring, and sex acts against children using force and violence" (p.101) and a child sex offender a person who commits those acts. Whilst the internet has made it possible for pornographic images of children to be widely disseminated, and increasingly so (Davidson, 2007; Elliott, Beech, Mandeville-Norden, & Hayes, 2009), it

is difficult to establish whether the offenders who possess such images have or will ever engage in sexual contact with children as the studies are sparse and the findings indicate a complex relationship between contact abusers and the collection or possession of child pornography (McCarthy, 2010). Long, Alison and McManus (2013) note that a greater proportion of contact offenders than non-contact offenders have access to children, so perhaps it is simply the opportunity to abuse (PM3) that increases the likelihood that the possessor of online child pornography will engage in contact CSA. However, some cohorts of child pornography offenders will have had no physical sexual contact with children (Christensen, 2017; Seto, 2017), and in other cohorts, anywhere from 50-85% will have had sexual contact with a child at least once (Elliot et al., 2009; McCarthy, 2010; Quayle & Sinclair, 2012) with some offenders using online interactions to facilitate offline abuse (Christensen, 2017; Davidson, 2007). Indeed, whilst online and offline offenders have a number of psychometric traits in common (Webb, Craissati, & Keen, 2007) and likely share a sexual interest in children (Seto, 2017), a number of differences have been noted between the two groups of offenders, such as the nature of the cognitive distortions used to internally justify their actions, their level of victim empathy, emotional dysregulation (critical for some models of offending) and impression management (Elliot et al., 2009; Quayle & Sinclair, 2012). Crucially, online offenses are conducted away from view (Davidson, 2007) which would make the goal spotting the signs of such abuse almost impossible. As such, this study will focus solely on offline offenses. Shannon et al. (2013) pioneered a programme aimed at female non-offending partners of child sex offenders, which would develop their ability to recognise the signs of CSA in the potential abuser and so be able to protect their children. This study is built on that work with the aim of attempting to determine how able adults are to detect the signs of child sex abuse and if there is a difference in detection rates between adults who have had training in spotting the signs of CSA and those who have not. Most CSA training given to adults, certainly those who work in education, focuses on the detection of physical and behavioural symptoms that

manifest in the child after the abuse has taken place (Dove & Miller, 2007; Topping & Barron, 2009). This study will focus on spotting the signs of potential CSA in the abuser, potentially before the sexual abuse takes place. In order to fit the scenarios described in the vignettes used in this study, Finkelhor's (1999) definition of CSA, as detailed above, was broadened to include all children i.e. all those under the age of 18.

As discussed earlier, the stereotypical view of child sex offenders is considered to inhibit detection (Sanghara & Wilson, 2006; Thakker, 2012). Whilst the most damaging stereotype is that the offender is unknown to the child, determining whether a person is known or unknown to a child is potentially difficult to achieve by a third party, and so this study will investigate the age stereotype, i.e. the stereotype that most child sex offenders are older men. As such, the following hypotheses will be tested:

H1: A scenario in which signs of child sex abuse are present in the abuser will be given a higher rating of the potential for child sex abuse than a scenario where the signs are not present.

H2: A scenario in which the potential offender is specified as being younger will be given a lower rating for the potential of CSA than a scenario in which the potential offender is specified as being older.

H3: Given the prevalence of the 'dirty old man' age stereotype of the CSO, a scenario in which the potential offender's age is specified as being younger will be given a lower rating for the potential of CSA than a scenario in which the potential offender's age is not specified.

H4: We would perhaps expect that adults trained in spotting the signs of CSA would be better at spotting abuse, where present. As such, in a scenario in which the signs of abuse are present, CSA trained adults will give a higher rating for the potential of CSA than adults not CSA trained. If no abuse is present, there would be no reason to expect a difference in rating.

Methodology

Participants

Participants were primarily a convenience sample, initially recruited from posters placed around university campuses (see Appendix A), the SONA system (see Appendix B for SONA message) and via social media. Recruitment messages were placed on the researcher's personal Facebook page and within two specific Facebook groups, on Twitter and to personal contacts via WhatsApp (see Appendix C for social media recruitment text).

Participants had to be over 18 to take part in the study and the research and recruitment methods were approved by the Ethics Committee of the Department of Psychology at the University of Chester (see Appendix D for ethics applications and amendments). The survey data showed that a vignette had been assigned to 62 participants, but only 57 complete responses were stored, indicating that 5 participants likely began the survey but then withdrew. Their partially completed data was automatically deleted by the survey and so were not included in the analysis.

The 57 participants (male = 14, female = 41, unknown = 2) varied in age from 18 to 60 ($M = 38.11$, $SD = 11.65$). 29 participants (50.9%) indicated that they had experience or training in identifying victims of CSA, 26 had not (45.6%) and 2 participants (3.5%) declined to provide the information.

Materials and Procedure

Initial steps.

The study took the form of an online questionnaire, all questions asked were optional. The participant would enter the survey in one of two ways. Either automatically via the hyperlink in the SONA system or by requesting the link from the researcher directly, having seen the recruitment posters or social media post(s). Participants would first be presented with the Participant Information Sheet (Appendix

E). If they were happy to proceed, on the next page of the survey participants were asked to provide their SONA RPS number (if relevant). On the next page, participants were asked for their demographic data (gender and age; see Appendix F for all survey questions). Then, on the next page, one of the six vignettes used (Appendix G) would be chosen at random and displayed to the participant. The participants were advised that the vignette could not be revisited once they moved on and were asked to read the vignette carefully.

Vignettes.

There were six vignettes, based one on of those used in Shannon et al.'s (2013) programme that developed the ability of non-offending partners to recognise the signs of CSA in the abuser. The vignettes were all based on the same scenario (a teenage boy and his relationship with his football coach) and differed from one another only slightly. Three of the vignettes contained signs of potential CSA and three vignettes did not contain signs of abuse ('no-abuse' group). Within each group ('abuse' and 'no-abuse') the three vignettes were identical except for the age of the potential abuser: no age given, 19 years old and 50 years old. The vignettes originally developed by Shannon et al. (2013) were revised specifically for the present research, based on careful consideration of the relevant theoretical and research literature. Some elements were included in all vignettes that formed the basis of stereotypical view of child sex offenders that are not fully supported by the literature. One such view of a child sex offender is that they have poor social skills (Fusilier et al., 2002; Howells, 1994), which is supported by some early literature (Bard et al., 1987; Marshall & Barbaree, 1990; Ward & Siegert, 2002). However, this has been contradicted by others. Finkelhor (1984) notes that poor social skills *can* be a factor that contributes to a lack of alternate sexual outlets ('blockage') which can lead to a sexual interest in children. However, Finkelhor (1984) also notes that that poor social skills are not a requirement for offending and the motivation to sexually abuse children can develop in

different ways. Marshall's (2010) recent work also notes that whilst social inadequacy and the loneliness that develop from this appear in higher levels in child sex offenders than rapists or other violent offenders, CSA is not an automatic consequence of loneliness. He goes on to argue that poor social skills are only one of a complex interplay of factors that lead to child sex offending, rather than being a direct cause. Indeed, it would be a logical fallacy to assume that because child sex offenders have poorer social skills than other offenders, that all people with poor social skills are child sex offenders. The poor social skills shown in all vignettes are expressed as the potential offender not having many friends and preferring to spend time alone.

The opportunity to spend time alone with the child, expressed as one to one football coaching sessions, is also present in all scenarios. These sessions could lay the foundation for meeting Finkelhor's (1984) third precondition, in that the potential offender has unsupervised access to the child. However, an adult gaining unsupervised access to a child is not uncommon, particularly for individuals who work or volunteer with children. Individuals motivated to offend often pursue such roles in order to gain access to children and later manipulate the situation to enable their offending (Colton, Roberts, & Vanstone, 2010). It is the manipulation of the unsupervised access that is key to offending, rather than the unsupervised access itself. So, the same overall scenario was used in all vignettes and common CSA manipulations appear in the 'abuse' vignettes, such as relationship nurturing, desensitising the child to sex-related topics and offering the child alcohol, to determine if they can be detected.

It is important for the child sex offender to build a good relationship with both the child and their family, to ultimately facilitate the CSA (Colton et al., 2010). Whilst the relationship is strong enough, in all vignettes, to initially enable the potential abuser to spend time alone with the child, it is only in the 'abuse' vignettes that this relationship is nurtured. The relationship with the child begins to deteriorate in the 'no-abuse' vignettes, with the potential abuser swearing, having poor mood control and snapping

at the child, leaving them to feel like they do not wish to spend time with the potential abuser. Whereas, in the 'abuse' vignette, the relationship is nurtured, such that the child is happy to discuss his relationships with local girls with the potential abuser. This presents the offender with a natural opportunity to subsequently progress to offending and such opportunities, when presented, can strongly influence the decision to offend (McKillop, Brown, Wortley, & Smallbone, 2015). Child sex offenders often build up to the offenses themselves by starting with light, explainable, physical contact like a paternal hand on the shoulder, and slowly build up to sexual abuse, depending on the reaction of the child to that early contact (Colton et al., 2010). In the 'abuse' vignettes, the offender, instead of using physical contact, is carefully desensitising the child to sex by complimenting his physique, allowing him to discuss his relationship with girls and offering contraception advice. Offenders often carefully test the reaction of the child to sex-related topics in this way (Elliot et al., 1995) and Leclerc and Felson (2016) note that this desensitisation process makes the child more likely to participate in sexual acts when they do occur. In this way, Finkelhor's (1984) fourth precondition, overcoming the resistance of the child, is met.

Other aspects of the 'abuse' vignettes are also important. The potential abuser invites the child to his home, ostensibly as part of his training but this also serves as a reward mechanism. The majority of child sex offenders abuse children in their own home (Colton et al., 2010; Leclerc & Felson, 2016), so the location is important here in the potential detection of abuse. The reward aspect is also important, giving gifts or rewards is seen as an important part of the inducement of the child (Colton et al., 2010; Leclerc & Felson, 2016; Stop it Now!, 2013; Ward & Hudson, 2001) and is another sign that could potentially be detected by adult observers, although the consumption of alcohol, as used in the vignette, may be difficult to detect in a real-world scenario. The actual mechanism of the reward is important here as well. In the 'abuse' vignette, the potential abuser offers the opportunity to watch videos of famous footballers to

ostensibly improve the child's footballing strategy and potentially watch other (unspecified) videos as well. Watching TV together has previously been identified as a good opportunity to initial sexual contact (Leclerc & Felson, 2017; Wortley & Smallbone, 2006).

Survey completion.

On the next page of the survey, participants were asked to rate the vignette for the potential to contain sexual abuse on a Likert scale from 0-10. To initially mask the true purpose of the study, for the purpose of avoiding potentially biased responses, participants were also asked to rate the likelihood of verbal, financial, emotional and physical abuse on separate 0-10 Likert scales. There was a sliding scale for the participant to enable them to indicate their response and alongside each Likert Scale, the participant could choose the 'no response' box. If this box was ticked, it was counted as no response, if the box was not ticked but the scale not moved, the default scale value of zero was used. Once the participants progressed to the next page, they were asked if they had training identifying victims of child sexual abuse, with answer options of Yes/No/Prefer not to say. The next page was the debrief sheet (Appendix H). Participants were advised that they needed to click the right arrow at the bottom of the debrief sheet in order for their responses to be saved. If the participant chose not to save their responses, they were advised that the survey would automatically delete incomplete responses after 7 days.

Analysis and Design

The dependent variable was the potential for sexual abuse in the vignette, as rated by participants on a 0-10 Likert scale. There were two independent variables, 1) if abuse was included in the vignette ('abuse', 'no-abuse') and 2) the age of the potential offender (none stated, 19, 50). This was a between-subjects design, with the participant being exposed only to one vignette. A 2('abuse', 'no-abuse') x 3(No age, 19, 50) ANOVA was run to analyse the data, with Tukey Post-Hoc testing as appropriate.

T-tests were used to explore any rating differences between those who have had training in spotting the signs of CSA and those who have not.

Results

The descriptive statistics presented in Table 1 are the mean participant ratings of sexual abuse per condition.

Table 1

Mean participant rating of sexual abuse per condition

Vignette	Abuse included?	Age	N	Mean sexual abuse rating (SD)
1	Yes	None given	9	6.22 (2.11)
2	Yes	19 (Young)	9	5.00 (2.60)
3	Yes	50 (Older)	11	5.91 (2.98)
	Yes	Overall	29	5.72 (2.58)
4	No	None given	9	2.44 (3.54)
5	No	19 (Young)	9	0.75 (1.39)
6	No	50 (Older)	10	2.56 (3.43)
	No	Overall	26	1.96 (3.00)
	Overall	None given	18	4.33 (3.43)
	Overall	19 (Young)	17	3.00 (3.00)
	Overall	50 (Older)	20	4.40 (3.55)

Assumption testing for the ANOVA revealed one outlier in the no abuse/19 condition (vignette 5). A z-score of 2.33 was determined for the outlier. Given that 4% of a normally distributed population would be expected to give a rating between 2 and 3

SD from the mean (Schmuller, 2017), and one participant represented less than 2% of the sample, the decision was taken to include the data in the analysis.

Assumption testing also revealed that that none of the data in each of the three no-abuse cells (vignettes 4-6) fitted an approximate normal distribution. Schmider, Ziegler, Danay, Beyer and Bühner (2010) indicate that ANOVA is robust to normality violations, in terms of Type I and Type II errors, provided that the number of participants per condition is greater than 25, but Blanca, Alarcón, Arnau, Bono and Bendayan (2017) note that ANOVA is robust to normality violation in terms of Type I error for all sample sizes. As the number of participants per condition in this study was below 25 (see Table 1), and Levene's test for normality of variance yielded a marginal result, $F(5,49) = 2.38$, $p = 0.052$, the decision was taken to use both parametric and non-parametric analyses in order to ensure robust findings.

The sexual abuse rating scores were analysed first with a two-way ANOVA which had two levels for abuse (yes, no), and three levels for abuser age (none given, 19, 50). The main effect of abuse was significant, $F(1,49) = 24.875$, $p < .001$, *partial* $\eta^2 = .337$, and with a large effect size, such that the overall rating for 'abuse' vignettes was significantly higher than the overall rating for 'no-abuse vignettes' (see Table 1). There was not a significant main effect for abuser age, $F(2,49) = 1.47$, $p = .24$, *partial* $\eta^2 = .057$ and the interaction effect was non-significant, $F(2,49) = 0.12$, $p = .89$, *partial* $\eta^2 = .005$.

The recommended non-parametric test for a 2-way ANOVA is a robust 2-way ANOVA including bootstrapping (Field, 2013). SPSS is unable to bootstrap the ANOVA part of the analysis (Field, 2013) leaving the results for the main and interaction effects identical to those shown above.

Given that SPSS was unable to run a full robust analysis, an attempt was made to analyse the data in R, which is able to fully bootstrap a 2-way ANOVA (Field, 2013).

However, the attempt was unsuccessful due to the researcher's unfamiliarity with R. The Kruskal-Wallis H test is the non-parametric equivalent of one-way ANOVA (Field, 2013) and so was used to separately analyse the sexual abuse rating scores in terms of the abuse and abuser age conditions, given the above limitation. The first Kruskal-Wallis H test indicated that there was a significant difference in sexual abuse rating between the abuse and no-abuse conditions, $\chi^2(1) = 16.57$, $p < .001$, with a mean rank for the rating of sexual abuse of 36.17 for abuse-included and 18.88 for no-abuse. The second Kruskal-Wallis H test indicated that there was not a statistically significant different sexual abuse rating between the 3 age conditions, $\chi^2(2) = 1.835$, $p = .40$, with a mean rank for the rating of sexual abuse of 29.94 for None given, 23.71 for Young (19) and 29.90 for Older (50). The results are in line with the ANOVA reported above.

A potential limitation of the Likert rating scale used is that if participants are not given a separate response option to indicate an undecided or non-committal response, as was the case here, participants will use the midpoint of a Likert scale to indicate such responses (Hodge & Gillespie, 2007; Johns, 2005). As such, the analyses were run again, with the midpoint responses (a rating of 5 for sexual abuse) treated as non-responses. The descriptive statistics presented in Table 2 are the mean participant ratings of sexual abuse per condition, with the midpoint responses removed.

A two-way ANOVA indicated that there was still a significant main effect for abuse, $F(1,40) = 24.30$, $p < .001$, *partial* $\eta^2 = .378$, again with a strong effect size. There was again no main effect for age, $F(2,40) = 1.33$, $p = 0.276$, *partial* $\eta^2 = .062$, and no significant interaction, $F(2,40) = 0.37$, $p = .693$, *partial* $\eta^2 = .018$. Thus, the initial findings were supported. The first Kruskal-Wallis H test again indicated a significant difference in sexual abuse rating between the abuse and no-abuse conditions $\chi^2(1) = 16.04$, $p < .001$ with a mean rank for the rating of sexual abuse of 31.55 for abuse-included and 16.13 for no-abuse. The second Kruskal-Wallis H test again indicated that there was not a statistically significant difference in the sexual

abuse rating between the 3 age conditions, $\chi^2(2) = 1.11$, $p = .574$, with a mean rank for the rating of sexual abuse of 24.17 for the None given, 20.81 for Young (19) and 25.44 for Older (50).

Table 2

Mean participant rating of sexual abuse per condition with midpoint responses

removed.

Vignette	Abuse included?	Age	N	Mean sexual abuse rating (SD)
1	Yes	None given	5	7.20 (2.49)
2	Yes	19 (Young)	8	5.00 (2.78)
3	Yes	50 (Older)	9	6.11 (3.30)
	Yes	Overall	22	5.95 (2.94)
4	No	None given	7	1.71 (3.73)
5	No	19 (Young)	8	0.75 (1.39)*
6	No	50 (Older)	9	2.56 (3.43)*
	No	Overall	24	1.71 (2.99)
	Overall	None given	12	4.00 (4.22)
	Overall	19 (Young)	16	2.88 (3.05)
	Overall	50 (Older)	18	4.33 (3.74)

* No participants in these cells gave a midpoint rating for sexual abuse.

To investigate the hypothesis that participants trained to spot the signs of CSA would be better able than untrained participants to spot the signs of abuse in the vignettes in which the signs of abuse were included, a t-test was run with the rating of the potential for CSA as the dependent variable. There was no significant difference in the sexual abuse ratings given for the 'abuse' vignettes between participants trained to

spot such abuse ($M = 5.40$, $SD = 2.26$) and those who were not ($M = 6.17$, $SD = 3.10$), $t(25) = -0.743$, $p = .464$. See Appendix I for full SPSS output.

Discussion

The results of the present study indicated that there was a significant difference in the rating of the potential for sexual abuse between the 'abuse' and 'no-abuse' conditions, which would allow acceptance of H1. The difference between the 'abuse' and 'no-abuse' conditions was fairly substantial. The parametric and non-parametric analyses did not indicate a significant main effect for abuser age. Even taking into account the directional nature of H2 and H3 and the associated p-value correction, there was no evidence to support these hypotheses and accept that a younger offender received a lower rating of the potential for sexual abuse than an older offender, or where the offender's age is not given. The analyses also indicated that there was not an interaction effect of abuse/abuser age. Interestingly, the analyses also showed that there was no significant difference in the ratings of the 'no-abuse' and 'abuse' vignettes, between those who had training in CSA and those who did not. As such, there is no support for H4.

That participants rated the potential for CSA in 'abuse' scenarios higher than 'no-abuse' scenarios is an important finding. A number of researchers are sceptical of the impact that offender management programmes have on reducing CSA (Finkelhor, 2009; Jewkes & Wykes, 2012). Indeed, it has been suggested that more effort should be dedicated to enhanced preventative detection of CSO's, rather than after-the-fact interventions that either have little empirical evidence to support them or are based on the notion of punishment rather than early detection and dissuasion (Finkelhor, 2009; van Dam, 2011). The results of this study go some way to supporting that suggestion, given that even without specific training, adults are able to detect signs of CSA in the abuser. This will potentially help to prevent the abuse from occurring or prevent the

CSO from abusing that victim (or others) further, when they may have previously remained undetected.

Just over half the participants of this study (approx. 51%) had training in identifying victims of child sexual abuse. This could be an important property of the sample used here. The CSA training provided in education, for example, where present (Márquez-Flores, Márquez-Hernández, & Granados-Gámez, 2016), is usually either directed at the children themselves (Hinkleman & Bruno, 2008) or focussed on symptoms that manifest after CSA has taken place (Dove & Miller, 2007; Topping & Barron, 2009). This is likely due to the fact that symptoms that may expressed by survivors of CSA such as inappropriate anger, irritability, social withdrawal, non-attendance at school (Dove & Miller, 2007) and sexualised behaviour (Everson & Faller, 2012) are potentially easier for professionals to immediately identify in an educational setting than signs of CSA in an abuser that the child potentially only has a relationship with outside of school. Indeed, professionals who work with children often struggle to believe a child's disclosure of sex abuse (Berelowitz, Clifton, Firimin, Gulyurtlu, & Edwards, 2013; Hinkelman & Bruno, 2008). Such a disclosure would likely include details of an associated adult and the situations the child found themselves in and the child may not necessarily present any of the associated emotional symptoms (Dove & Miller, 2007). Although this kind of disbelief is in decline (Márquez-Flores et al., 2016), a number of myths and mistaken beliefs regarding the victim and perpetrator that inhibit detection of CSA still exist (Berelowitz et al., 2013; Márquez-Flores et al., 2016). This might go some way to explaining why H4 was not supported in this experiment and untrained participants gave similar ratings to trained participants. It may also be the case that the focus of CSA training on the physical and emotional symptoms exhibited by survivors of CSA proved unhelpful in a context where the actions of the potential abuser were scrutinised instead. To explore this further in future studies, it would be interesting to attempt to differentiate between the kinds of training

given to participants, and use a questionnaire centred on common myths and mistaken beliefs to explore if the attitude of the participants to CSA was linked to their ability to detect it, rather than any training given.

That both trained and untrained participants rate abuse vignettes higher than no-abuse vignettes but showed no significant differences due to offender age would seem to run contrary to the 'dirty old man' stereotype of the CSO (Fuselier et al., 2002; Sanghara & Wilson, 2006) that is propagated by the media (Cohen, 2002; Gavin, 2005; Wolak et al., 2008). The stereotype is reported to have a considerable impact on perception and public policy, such as the creation of sex offender registers and the redistribution of government resources away from Child Protection Units, and towards data or internet surveillance (Jewkes & Wykes, 2012). However, participants in Thakker's (2012) study indicated an awareness of the media's tendency towards sensationalism and the promotion of extreme examples, such as the media's biased depiction of sex offender stereotypes (Gakhal & Brown, 2011), which drives an inherent distrust of the media as a factual information source and potentially reduces the impact of the age stereotype. Thakker's (2012) study was qualitative in nature and so the number of participants was limited to around 20 or so, however their findings correspond to those of others. For example, Splichal and Dahlgren (2016) assert that trust in journalists and the media as a whole has been steadily declining for a number of years. The media may still be the most powerful way to draw the public's attention to an issue (Happer & Philo, 2016), but more people now distrust than trust the media (Splichal & Dahlgren, 2016). As a result, the general public are not using the media as a factual information source and instead drawing on additional sources of information for a complete picture of the issue (Happer & Philo, 2016; Thakker, 2012). This would potentially allow the public to both be more aware of issues surrounding CSA and resist the age stereotype of the CSO, allowing them to rate it higher where present, but show no difference in rating due to offender age.

One of the potential sources of information that Happer and Philo (2016) note could be used in addition to the media when drawing our own conclusions about a topic is our own personal experience. 72% of participants were female. As more females than males encounter sexual abuse as a child (Radford et al., 2013), it is conceivable that the participants' own experience with CSA and abusers has facilitated both the recognition of a CSA-likely scenario and rejection of the age stereotype found in this study. However, data on the participants' own experience of CSA was not collected. Moreover, child sexual abuse is a traumatic experience and leads to a number of difficulties in adult life (Alaggia, 2004; Kennedy & Prock, 2016; Richards, 2011) and so survivors of CSA might well have heeded the guidance contained in the participant recruitment material or participant information sheet and not completed the survey, to avoid subjecting (or re-subjecting) themselves to further trauma. It is difficult to make a judgement based on the information collected. It would potentially be useful therefore, in future research, to ask participants, if they were comfortable revealing such information, if they had any experience of child sex abuse themselves and use this information to explore if their experience of CSA had an impact on their rating of the vignettes for the potential of CSA.

It also could be argued that the rejection of the media-driven age stereotype of child sex offenders comes not just from the distrust of the media as a factual information source but also the widespread reporting in the media of child sex offenders of all ages. In perhaps the most notable example of a recent high-profile child sex abuse case, nine men, whose ages were reported as ranging from their early twenties to mid-fifties (Scheerhout, 2017), were found guilty in 2012 of sexually abusing and exploiting a number of underage girls in the town of Rochdale (Gill & Harrison, 2015). The men were all British Muslims of Asian descent and together with five Asian men convicted in Rotherham for similar offences found themselves at the centre of a 'moral panic' - a moral debate driven by a righteous media over a perceived threat to

society (Cohen, 2002). In this case, the moral panic was over some supposed ethnic or religious factor that allows or encourages Muslim or Asian men to exploit young white British girls and the reluctance of the authorities to investigate such crimes for fear of stirring racial or ethnic tensions (Gill & Harrison, 2015; Tufail, 2015; Tufail & Poynting, 2016). It is conceivable therefore that the widespread reporting of and moral panic surrounding such high-profile CSA cases, where the offenders are (or are primarily) below the stereotypical child sex offending age, has increased vigilance for the signs of abuse, hence support for the first hypothesis, and has also an impact on the public perception of the typical age of the child sex offender and minimised the impact of the 'dirty old man' stereotype.

However, whilst such high-profile cases are widely reported, it was not recorded in this study if the participants had been exposed to media reports of this or any other child sex abuse cases. With recruitment for this study taking place primarily on social media, despite the study being UK based, there is no guarantee that any or all of the participants resided in the UK and/or were exposed to the UK news media and/or associated moral panic(s). It would be interesting for future studies to capture not just the participant's country of residence, but if the participants had an awareness of any reported child sex abuse cases, either in the UK or their own country. This would not be a perfect solution as a forgotten news story may have had an impact on the participant's biases, or the offender in the report(s) that the participants are aware of could fit the age stereotype. However, such an investigation could request relevant details from participants, which would potentially allow the age stereotype to be investigated more thoroughly.

Given the clear difference in rating between the abuse and no-abuse scenarios, that the mean rating of the potential for sexual abuse in the abuse scenarios is around the midpoint is very interesting. Johns (2005) notes that 20-50% of respondents will favour the use of the midpoint on a Likert scale which is considered to be a non-

committal or undecided response (Hodge & Gillespie, 2007; Johns, 2005) arising either from ambivalence or indifference (Chyung, Roberts, Swanson, & Hankinson, 2017; Johns, 2005). This leads to the potential for one of two possibilities. The first is that the vignettes gave enough information to the participant to allow them to consider that it was equally possible for an abuse or no-abuse scenario to exist and the midpoint was selected as an indication of this ambivalence. The second is that the participants were not given enough information to consider either option and social desirability led them to choose a neutral option to avoid selecting the 'no response' option (Chyung et al., 2017; Johns, 2005). As such, treating the midpoint at face value rather than as a non-response may have affected the reliability of the results (Chyung et al., 2017; Hodge & Gillespie, 2007). On the 0-10 Likert scale used here, the midpoint would be 5. Only 16% of participants in this study used 5 in their rating for the potential of sexual abuse, a little lower than Johns' (2005) expectations. Nevertheless, to check the reliability of the results found here, the analyses were run again with the midpoint ratings treated as non-responses, as Hodge & Gillespie (2007) suggest. Whilst there was little impact on the results of the analysis here, future studies may wish to consider carefully the implications of a midpoint rating on a Likert scale and either use another rating system or a Likert scale that has no single midpoint, 1-10 for example, rather than 0-10. Although, the implication of a 1-10 Likert scale is that, without an alternate option such as "none" or "N/A", there is no way to record a zero likelihood of abuse. Similarly, not having a 'no response' option does not give the participant the ability to opt out of answering a question on such an emotive topic. Researchers should give thought to adding all such options to future studies.

Given the propensity of participants to use the midpoint to avoid giving a socially undesirable response (Chyung et al., 2017; Johns, 2005), it is worth considering what exactly it is that would be undesirable about potentially protecting a child from sexual abuse. Interestingly, when authority figures are presented with clear

cases of child sexual abuse, many are reluctant to report it, at least immediately (Stop it Now!, 2013; Vieth, 2013). Some feel that reporting may do more harm than good, others cite lack of training or clarity as to the relevant reporting laws (Stop it Now!, 2013). Indeed, once reported, the case may not even be investigated. (Stop it Now!, 2013; Vieth, 2013). So, despite the legal obligation that educators, for example, have to report suspected child sexual abuse (Dove & Miller, 2007), a resistance to reporting or investigating it is clearly indicated in the literature. One possible explanation for this is that, being illegal, CSA is considered to be contrary to social norms (Quinn, Forsythe, & Mullen-Quinn, 2004), despite its prevalence, and in general, people are resistant to confronting those who violate social norms unless there is some perceived non-financial personal benefit (Balafoutas & Nikiforakis, 2012; Berkos, Allen, Kearney, & Plax, 2001). Whilst it is doubtful that professionals who work with children would be required to confront the abuser themselves, it would be worth considering in future studies if the reluctance of professionals to believe the child, report or investigate CSA is grounded in a resistance to confront the violation to social norms. Reporting may create more work for the individual and this may not be of personal benefit. It will likely be difficult, in future research, to include a measure of personal benefit to correctly identifying the signs of child sexual abuse. A perceived benefit may artificially increase reporting rates, for example, but the motivations of the participant may be worth exploring perhaps with some questions that explore the participants' attitudes to social norms and confronting breaches to those norms.

Milligan (2014) notes that a commonality of recent models of child sexual abuse is that there needs to be a combination of proximal and distal factors at work before abuse can take place. For example, Seto's (2017) motivation-facilitation model (MFM) of child sexual abuse, based in part on Finkelhor's work, requires that the offender be motivated to abuse, and have a combination of trait (distal attitudes) and state (proximal environmental) facilitation factors working in their favour. Even then, Seto

(2017) argues, without a victim, sexual abuse naturally cannot take place. It could be argued then that even with a victim in place and favourable proximal facilitation factors present, as indicated by the vignettes, if the adult is not motivated to sexually abuse a child, it is unlikely to happen. The potential offenders were not described in the vignettes in terms of their motivation to abuse – the three primary distal motivations for CSA present in Seto's (2017) MFM model (paraphilia, sex drive and mating effort) for example. It is unlikely that participants were familiar with this or other models of CSA motivation. However, without any indication of abuser motivation or access to the visual and verbal cues that are used to make determinations about others (Wright-Whelan, Wagstaff, & Wheatcroft, 2015), it is conceivable therefore that participants who rated around the midpoint on average did not feel that they had enough information about the potential abuser. This despite the recent research focus on purely situational contexts in the investigation and prevention of child sexual abuse cases (McKillop et al., 2015), rather than motivational factors.

There were, naturally, some limitations to this study. The near-universal issue surrounding sample size is a limitation here as well. It potentially contributed to the normality issues discussed earlier and likely occurred due to an overreliance on poster recruitment in the early stages of the study, which proved to be an ineffective recruiting tool. Future studies should promote a wide range of participant recruitment methods and potentially ask participants how they heard of the study in order to measure the effectiveness of each method. In addition, a substantial proportion of participants were around the same age as the researcher, with very few older or younger participants. This is likely an artefact of using social media for recruitment. It is important to determine if the signs of abuse could be spotted by professionals of all ages who work with children, and so more focus on recruitment methods other than social media would potentially increase the number of participants of all ages. That the vignettes were all set in a football coaching context could have been a limitation here as well. It could be

argued that there have been a number of incidents of CSA involving all manner of professionals who work with children, but CSA by football coaches and scouts is being widely reported and investigated at the moment (Spillett, 2018) and using this context in the vignettes could have potentially made the participants more vigilant to signs of CSA. Future studies could potentially make use of a within-subjects design, where participants would be asked to rate vignettes set in a number of different contexts. Both 'abuse' and 'no-abuse' scenarios could be included as well, to allow further investigation of the higher ratings given to 'abuse' scenarios and similarity of ratings between trained and untrained participants.

There were also some limitations surrounding the design of the online survey itself. Whilst the use of Qualtrics as survey provider allowed for vignettes to be automatically assigned to participants at random, the questions regarding the vignettes were not placed on the same page as the vignette due to technical difficulties. As such, and despite a warning that this would be the case, participants were unable to refer back to the vignette if they were unsure about the answer to a particular question or needed to remind themselves of some details. There is a possibility that this could have affected the responses and so having the questions on the same page as the vignette would be indicated for future studies, if only to see if there was a difference in the ratings compared to this study. In addition, whilst there was a 'not applicable' option for each question, participants did not have the ability to indicate that they were not sure or did not know if any of the forms of abuse applied, aside from possibly using the midpoint of the Likert scale, as discussed earlier. Whilst the results did not change overly much if the midpoints were removed from the analysis in this sample, it does not mean that there would be no change in other samples. If additional response options were incorporated in future experiments, this would provide a method of determining if the midpoint was actually used in this way or if this was a genuine rating of the likelihood of abuse.

In conclusion, this experiment found that whilst participants were able to distinguish between the 'abuse' and 'no-abuse' conditions, no support was found for the hypothesised difference in rating due to the age stereotype propagated by the media. In addition, the ratings given by professionals who had training in spotting the signs of CSA were not significantly different to those who did not have training. The lack of trust in the media as a factual information source, extensive reporting of high-profile cases that did not include a stereotypically-aged sex offender (and associated moral panic), and the personal experiences of the participants were considered as mitigating factors for the age stereotype. Further investigation is needed to determine why the ratings were similar between trained and untrained individuals.

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<https://doi.org/10.1080/00223980.2014.911140>

Poster 1

Difficult Situations

Online Survey



Help me to research this area by participating in an online study that will only take a few minutes of your time. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions.

Please note that the vignette may potentially contain upsetting or distressing details. Please do not take part in the survey if you have ever been affected by: drug or alcohol abuse within the family or those close to you; mental health problems which have led to family problems or breakdowns; violence, or sexual or emotional abuse.

Contact Nick (1601250@chester.ac.uk) for further information.
Supervisor: Clea Wright (clea.wright@chester.ac.uk)

Difficult Situations

Online Survey



Help me to research this area by participating in an online study that will only take a few minutes of your time. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions.

Please note that the vignette may potentially contain upsetting or distressing details. Please do not take part in the survey if you have ever been affected by: drug or alcohol abuse within the family or those close to you; mental health problems which have led to family problems or breakdowns; violence, or sexual or emotional abuse.

Contact Nick (1601250@chester.ac.uk) for further information.
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Difficult Situations



Help me to research this area by participating in an online study that will only take a few minutes of your time. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions. |

Please note that the vignette may potentially contain upsetting or distressing details. Please do not take part in the survey if you have ever been affected by: drug or alcohol abuse within the family or those close to you; mental health problems which have led to family problems or breakdowns; violence, or sexual or emotional abuse.

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Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk	Difficult Situations 1601250@ chester.ac.uk
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Appendix B – Recruitment Text Used On SONA

Difficult situations

This study is open to anyone over the age of 18 and any Psychology student at the University of Chester will earn 2 RPS points for participating. Participation in the study will involve reading information that may potentially contain distressing details. Please do not complete in the survey if you have ever been affected by:

Drug or alcohol abuse within the family or those close to you.

Mental health problems which have led to family problems or breakdowns.

Violence, or sexual or emotional abuse.

If you are affected by any of these issues, then you can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

If you agree to take part in the study, you will be directed to an external website. You will be asked to read a short piece of descriptive writing (vignette) and subsequently answer questions based on the vignette. You can withdraw participation before at any time by advancing past the questions to the debrief sheet. Any partially completed responses will be discarded and later deleted.

Appendix C – Social Media Recruitment Messages

Facebook and WhatsApp

Difficult situations online survey.

Hi. Would you like to complete my online survey? It's for my master's dissertation. Help me research difficult situations by completing an online survey. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions. Please note that the vignette may potentially contain upsetting or distressing details.

If you wish to take part, please private message me and I will send you further information.

Thanks 😊

Twitter

Hi. Would you like to complete my online survey? It's for my master's dissertation. Help me research difficult situations by completing an online survey.

(This was followed to a link to the full recruitment message on Facebook).

Appendix D – Ethics Forms and Amendments

Initial Ethics Application with Reviewer Comments

AF

Staff / Office Use Only	
DOPEC NUMBER:	<i>Click here to enter text.</i>
Umbrella project DOPEC number (staff)	<i>Click here to enter text.</i>

APPLICANT SURNAME	Goddard
--------------------------	---------

APPLICANT:	UG <input type="checkbox"/>	PGT <input checked="" type="checkbox"/>	PGR <input type="checkbox"/>	Staff <input type="checkbox"/>
REVIEW PROCESS:	Accelerated <input type="checkbox"/>	Full <input checked="" type="checkbox"/>		
APPLICATION STATUS:	New application <input checked="" type="checkbox"/>	Major amendment <input type="checkbox"/>	Resubmission <input type="checkbox"/>	
APPLICATION FOR:	Dissertation <input checked="" type="checkbox"/>	Teaching <input type="checkbox"/>	Research & publication <input checked="" type="checkbox"/>	
ATTENDANCE AT HEALTH & SAFETY BRIEFING:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	
INCLUSION OF RISK ASSESSMENT FORM:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>	

NOTES ON THE ROLE AND FUNCTION OF THE DEPARTMENT OF PSYCHOLOGY ETHICS COMMITTEE.

- All decisions of the committee are based on the application form and reviewers comments ONLY. Forms should be as detailed and clear as possible. Verbal discussions are not considered as part of the application or review process.
- The review process strictly adheres to the University of Chester Research Governance Handbook and the BPS Code of Ethics.
- The decision of the committee is final. If you are a UG, PGT or PGR student you should discuss the decision of the committee with your supervisor. If you are a member of staff you may contact the chair of the committee for further clarification.

Before completing the form researchers are expected to familiarise themselves with the regulatory codes and codes of conduct and ethics relevant to their areas of research, including those of relevant professional organisations and ensure that research which they propose is designed to comply with such codes.

Department of Psychology Ethical Approval for Research: Procedural Guidelines.

University of Chester Research Governance Handbook

http://ganymede2.chester.ac.uk/view.php?title_id=522471

BPS Code of Ethics

http://www.bps.org.uk/system/files/Public%20files/bps_code_of_ethics_2009.pdf

BPS Code of Human Research Ethics

http://www.bps.org.uk/sites/default/files/documents/code_of_human_research_ethics.pdf

BPS Guidelines for Internet-mediated Research

<http://www.bps.org.uk/system/files/Public%20files/inf206-guidelines-for-internet-mediated-research.pdf>

BPS Research Guidelines and Policy Documents

<http://www.bps.org.uk/publications/policy-and-guidelines/research-guidelines-policy-documents/research-guidelines-poli>

Any queries email: n.davies@chester.ac.uk or psychology_ethics@chester.ac.uk

CHECK LIST.

Please complete the form below indicating attached materials. Prior to submission supervisors must confirm that they have reviewed the application by completing the supervisors column.

Notes: Students to indicate where information is found, supervisor to confirm by ticking green column	Supervisor confirmation	Information sheet	Letter	Email	Email info. page	Consent Form	PowerPoint	N/A
Brief details about the purpose of the study	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact details for further information	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation of how and why participant has been chosen	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notification that materials/interviews are not diagnostic tools/therapy or used for staff review/development purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explanation participation is voluntary	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of any incentives or compensation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of how consent will be obtained	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If research is observational, consent to being observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Details of procedure so participants are informed about what to expect	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of time commitments expected	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of any stimuli used	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation of right to withdraw and right to withdraw procedure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option for omitting questions participant does not wish to answer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Procedure regarding partially completed questionnaires or interviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With interviews, information regarding time limit for withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Details of any advantages and benefits of taking part	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of any disadvantages and risks of taking part	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information that data will be treated with full confidentiality and that, if published, those data will not be identifiable as theirs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Debriefing details	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissemination information	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further information (relevant literature; support networks etc)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Supervisor Signature: Clea Wright

Date :05/03/2018



University of Chester

DEPARTMENT OF PSYCHOLOGY
APPLICATION TO
DEPARTMENTAL ETHICS
COMMITTEE

**WHEN COMPLETING THE FORM PLEASE REFER TO THE DOP ETHICS PROCEDURAL
GUIDELINES HANDBOOK.**

UG AND PGT STUDENTS CAN ACCESS A COPY ON THEIR RELEVANT MOODLE PAGE.

**PGR AND STAFF SHOULD CONTACT n.davies@chester.ac.uk or
psychology_ethics@chester.ac.uk**

1. Working title of the study

Notes: The title should be a single sentence

Spotting the signs of child sexual abuse.

2. Applicant name and contact details

Notes: The primary applicant is the name of the person who has overall responsibility for the study. Include their appointment or position held and their qualifications. For studies where students and/or research assistants will undertake the research, the primary applicant is the student (UG, PGT, PGR) and supervisor is the co-applicant.

Nick Goddard. 1601250@chester.ac.uk

3. Co-applicants

Notes: List the names of all researchers involved in the study. Include their appointment or position held and their qualifications

Clea Wright, Supervisor. clea.wright@chester.ac.uk

4. Start and end dates of the study

Notes: The title should be a single sentence

March 2018 – 26 Sep 2018

5. Is this project subject to external funding?

Notes: Please provide details of the funding body, grant application and PI.

No

6. Briefly describe the purpose and rationale of the research

Notes: (Maximum 300 words). In writing the rationale make sure that the research proposed is grounded in relevant literature, and the hypotheses emerge from recent research and are logically structured.

If this application is for a PGR/Staff funded project please attach any detailed research proposals as appropriate.

A review of the literature on sex offenders suggests that members of the public, to a greater extent (and likely as a result of the actions of the media, particularly print media), subscribe to a stereotypical view of a sex offender (Gakhal & Brown, 2011; King & Roberts, 2015; Levenson, Brannon, Fortney & Baker, 2007). Whilst this stereotype has many facets and is subject to some variation, a common view is that sex offences (including child sex offenses) are primarily committed by older males (Sanghara & Wilson, 2006; Thakker, 2012). In reality, whilst offenses

are committed primarily by men, the men can be of any age or demographic (Elliot, Browne & Kilcoyne, 1995; Sanghara & Wilson, 2006)

The aim of this study is to determine if the stereotype hinders identification of a situation where child sex abuse could potentially be taking place. The participant will be presented with one of six versions of a vignette via an online questionnaire. The six versions will take account of the following independent variables:

Signs of sexual abuse (included/not included)

Age of involved male (not disclosed - control/19 - Young/50 - Old)

The participant will be asked to rate each vignette for the potential for verbal, physical, financial, emotional and sexual abuse.

See Appendix F for all 6 versions of the vignette.

This will allow me to test the following hypotheses:

- 1) If the age of the offender is shown as 19 (Young condition) participants' rating of the potential for sexual abuse will be lower than if the age is shown as 50 (Old condition).
- 2) Given the stereotypical view of sex offenders, the ratings for the control (no age given) will be similar to that given in the Old condition.

The data will be analysed using two 1x3 ANOVAs, one for the abuse included condition, one for the abuse not included condition. Significant results may be further analysed using post-hoc t-tests.

7a. Describe the methods and procedures of the study

Notes: (Maximum 500 words) Attach any relevant material (questionnaires, supporting information etc.) as appendices and summarise them briefly here (e.g. Cognitive Failures Questionnaire: a standardised self-report measure on the frequency of everyday cognitive slips). Do not merely list the names of measures and/or their acronyms. Include information about any interventions, interview schedules, duration, order and frequency of assessments. It should be clear exactly what will happen to participants. If this is a media based study describe and list materials include links and sampling procedure.

Participants will be recruited via the SONA system and offered two RPS credits for participation. It will be made clear to participants that the study may involve them reading potentially distressing information and directs potential participants to sources of support within and outside of the university. If they are happy to proceed, a link to the online questionnaire is provided. Please see Appendix A: Recruitment text to be used on SONA.

The first page of the online questionnaire

(https://qtrial2018q1azl.azl.qualtrics.com/jfe/form/SV_5yvriauJBsGSWeF) contains the text of the participant information sheet (see Appendix B). This again warns of the potential to be exposed to distressing information and directs potential participants to sources of support, both externally and within the university. It is made clear that participants can withdraw their participation at any time and that partially completed surveys will be deleted. Participants will be able to access the debrief sheet if they withdraw part way through the survey.

The participant will then be asked for their RPS number and their sex and age. Participants will not be asked to reveal any personally identifying information. In the next part of the questionnaire, the participants will be asked to read their vignette, which has been randomly allocated by the questionnaire. Care has been taken to ensure that, whilst allocated randomly, all vignettes will be presented approximately evenly. Once the participant has fully read the vignette, the participant will advance to the next page and they will be asked to rate the likelihood of the potential for verbal, financial, sexual, emotional and physical abuse (in that order) on a 10-point Likert scale. All questions have a "Prefer not to answer" option. Participants will then be presented with the debrief sheet (see Appendix C), which will explain why the focus of the study was not made more explicit at the beginning and direct the participant to sources of support both within and outside the

university. The debrief sheet will make it clear that the vignette may not have contained details of potential child sexual abuse but if the participant is concerned, the name and contact details of two specialist organisations that can provide support and guidance are listed. See Appendix F for all 6 versions of the vignette. The vignettes have previously been approved by the ethics committee for other studies and have been subject to only minor modification for this study.

7b. Provide details of your contingency plan

Notes: Please briefly describe your contingency plan. (100 words)

Should not enough participants be recruited directly via the SONA system, posters will be placed around the Psychology building and Parkgate campus as a whole. These posters will include a generic clipart or image that indicates "research" or "questionnaire". See Appendix D for text used.

Should this be unsuccessful, the recruitment process will be extended to include individuals personally known to the researcher, by placing a post on the applicant's Facebook page (see Appendix E).

8. Provide details of the previous experience of the procedures by the person conducting the study.

Notes: Say who will be undertaking the procedures involved and what training and/or experience they have. If supervision is necessary, indicate who will provide it.

My supervisor has experience in conducting this sort of research.

9. Describe the ethical issues raised by this study and discuss the measures taken to address them.

Notes: Describe any discomfort or inconvenience that participants may experience. Include information about procedures that for some people could be physically stressful or might impact on the safety of participants, e.g. interviews, probing questions, noise levels, visual stimuli, equipment; or that for some people could be psychologically stressful, e.g. mood induction procedures, tasks with high failure rate, please include your distress protocol. Discuss any issues of anonymity and confidentiality as they relate to your study, refer to ethics handbook and guidance notes at the end of the form. If animal based include ethical issues relating to observation.

The task may pose some psychological distress by anyone who has been personally affected by abuse. Participants are informed that the research is on a potentially sensitive topic and any potential participants who have been personally affected by abuse or mental health problems are directed to not undertake the study, both in the recruitment text and Participant Information Sheet. Sources of support within and outside the university are listed in the recruitment text, the Participant Information Sheet and the Debrief sheet. Participants are directed to discontinue participation if they feel any distress.

In order for their responses to be unaffected by foreknowledge of the focus of the study, the recruitment text and debrief sheet mentioned only that this is a study on difficult situations, and not that it specifically looks at child sexual abuse. One possibility is that participation in this research could lead a participant to become aware of the suspicious behaviour of someone they know. Whilst this in itself might be a very good thing and prevent or stop actual abuse, this could be difficult or distressing for participants and care will be taken to ensure that they are provided with suitable advice and support.

10. Describe the participants of the study.

Notes: Describe the groups of participants that will be recruited and the principal eligibility criteria and ineligibility criteria. Make clear how many participants you plan to recruit into the study in total.

Psychology students at the University of Chester are the primary group of participants. Should the contingency plan be activated, the pool of potential participants will be widened to include other members of the university population, as posters will be placed around Parkgate Road campus, and persons over the age of 18 directly known to the researcher, as it may be advertised on Facebook.

The primary eligibility criteria are that participants are over the age of 18 and must not have been affected by any kind of abuse or mental health problems.

I plan to recruit a minimum of 60 participants into the study. The online questionnaire tool permits access to a maximum of 100 responses in their free plan, including responses generated during the testing and ethics application phase. As a result, I anticipate the maximum number of responses to be 92. Should the questionnaire gain significantly more response, I will consider purchasing a paid plan for which I will meet the payment requirements.

11. Describe the participant recruitment procedures for the study.

Notes: Gives details of how potential participants will be identified or recruited, please list any social media platforms that you will use and the message. Include all other advertising materials (posters, emails, letters, verbal script etc.) as appendices and refer to them as appropriate. Describe any screening examinations. If it serves to explain the procedures better, include as an appendix a flow chart and refer to it.

Potential participants will be recruited from the SONA system in the first instance using the text shown in Appendix A. Should the contingency plan be activated, posters will be placed around the Psychology building and Parkgate campus as a whole. These posters will include a generic clipart or image that indicates "research" or "questionnaire". See Appendix D for text to be used. Should further participants be required, as per the contingency plan, the recruitment process will be extended to include individuals personally known to the researcher, via a post on Facebook. The text of which forms Appendix E.

12. Describe the procedures to obtain informed consent

Notes: Describe when consent will be obtained. If consent is from **adult participants**, give details of who will take consent and how it will be done. If you plan to seek informed consent from **vulnerable groups** (e.g. people with learning difficulties, victims of crime), say how you will ensure that consent is voluntary and fully informed.

If you are recruiting **children or young adults** (aged under 18 years) specify the age-range of participants and describe the arrangements for seeking informed consent from a person with parental responsibility. If you intend to provide children under 16 with information about the study and seek agreement, outline how this process will vary according to their age and level of understanding.

How long will you allow potential participants to decide whether or not to take part? What arrangements have been made for people who might not adequately understand verbal explanations or written information given in English, or who have special communication needs?

If you are not obtaining consent, explain why not.

Participants will be informed that if they advance past the Participant Information sheet, they are providing their consent. Consent can be withdrawn at any time by failing to complete the questionnaire. Incomplete responses will be deleted.

13. Will consent be written?

Yes ☐ No ☒

Notes: If yes, include a consent form as an appendix. If no, describe and justify an alternative procedure (verbal, electronic etc.) in the space below.

Guidance on how to draft Participant Information sheet and Consent form can be found on PS6001 Moodle space and in the Handbook.

Participants are advised that if they click on the link to the survey and advance to the page after the Participant Information Sheet, they are providing their consent. Consent can be withdrawn at any time by failing to complete the questionnaire. Incomplete responses will be deleted. Whilst participants are asked to preferably complete all questions, participants have the option to select "Prefer not to answer" and this is made clear to the participant. Once a full set of responses have been submitted, due to the anonymous nature of the information provided, it is not possible for a participant to withdraw consent.

14. Describe the information given to participants. Indicate if and why any information on procedures or purpose of the study will be withheld.

Notes: Include an Information Sheet that sets out the purpose of the study and what will be required of the participant as appendices and refer to it as appropriate. If any information is to be withheld, justify this decision. More than one Information Sheet may be necessary.

Whilst participants are aware that the study is on difficult situations (as per Appendices A-E), the exact focus of the study is not revealed until the debrief sheet. This is to try to avoid the participant from being biased in their response as to the likelihood of sexual abuse in the vignette they were presented with.

15. Indicate if any personally identifiable information is to be made available beyond the research team. (eg: a report to an organisation)

Notes: If so, indicate to whom and describe how confidentiality and anonymity will be maintained at all stages.

The data is anonymised, no participant can be identified from the information they provide.

16. Describe any payments, expenses or other benefits and inducements offered to participants.

Notes: Give details. If it is monetary say how much, how it will be paid and on what basis is the amount determined. Indicate RPS credits.

Two RPS credits.

17. Describe the information about the investigation given to participants at the end of the study.

Notes: Give details of debriefings, ways of alleviating any distress that might be caused by the study and ways of dealing with any clinical problem that may arise relating to the focus of the study.

At the end of the study, the exact focus of the study is revealed and what the information could be used for. Participants are directed to support organisations for general emotional distress and specialist organisations that can help if they have questions regarding child sex abuse. It is made repeatedly clear to the participant that the vignette they were allocated may not have included any signs of abuse. See Appendix C for debrief sheet.

18. Describe data security arrangements for during and after the study.

Notes: Digital data stored on a computer requires compliance with the Data Protection Act; indicate if you have discussed this with your supervisor and describe any special circumstances that have been identified from that discussion. Say who will have access to participants' personal data and for how long personal data will be stored or accessed after the study has ended.

No personal data on participants is requested and so none will be stored. The researcher has access the survey responses via the questionnaire website, which is protected by a username/password. The responses will be coded for analysis by SPSS. The SPSS data file will be held securely on the researcher's home computer and a backup securely stored online, protected by a username/password.

SIGNATURES OF THE RESEARCH TEAM

Notes: The primary applicant and all co-applicants must sign and date the form. Scanned or electronic signatures are acceptable.

Nick Goddard

03/03/2018

Clea Wright

05/03/2018

ETHICS COMMITTEE DATE 22/03/2018

☐ ACCEPTABLE

You may now commence data collection subject to approval from any relevant external agencies.

CHAIRS COMMENTS

☒ Read and review all reviewers comments

DATA COLLECTION IS NOT PERMISSABLE UNDER THE FOLLOWING 3 CONDITIONS. Please address the issues indicated.

☒ ACCEPTABLE SUBJECT TO SUBMISSION OF AMENDMENT FORM

UG and PG students should discuss any recommendations with their supervisors.

☐ ACCEPTABLE SUBJECT TO CONDITIONS OF CHAIR

Resubmit application for full review after addressing the issues described, ensuring you have indicated on the front page of the form that this is a resubmission.

☐ REVISE AND RESUBMIT

Resubmit application for full review ensuring you have indicated on the front page of the form that this is a resubmission

SIGNATURE: Click here to enter text.



Appendix A: Recruitment text to be used on SONA

Difficult situations

This study is open to anyone over the age of 18 and any Psychology student at the University of Chester will earn 2 RPS points for participating. Participation in the study will involve reading information that may potentially contain distressing details. Please do not complete in the survey if you have ever been affected by:

Drug or alcohol abuse within the family or those close to you.

Mental health problems which have led to family problems or breakdowns.

Violence, or sexual or emotional abuse.

If you are affected by any of these issues, then you can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

If you agree to take part in the study, you will be directed to an external website. You will be asked to read a short piece of descriptive writing (vignette) and subsequently answer questions based on the vignette. You can withdraw participation before at any time by advancing past the questions to the debrief sheet. Any partially completed responses will be discarded and later deleted.

https://gtrial2018q1az1.az1.qualtrics.com/jfe/form/SV_5yvriauJBsGSWeF

Appendix B: Participant Information Sheet

Online survey into how we understand difficult situations

This study is open to anyone over the age of 18 and University of Chester Psychology students can earn 2 RPS points for taking part. Participation is entirely voluntary. This study involves reading a short piece of descriptive writing (vignette) and then answering questions on the vignette you have just read. The vignette may potentially contain distressing (or triggering) information. Please do not take part if you are or have ever been affected by affected by:

Drug or alcohol abuse within the family or those close to you.

Mental health problems which have led to family problems or breakdowns.

Violence, or sexual or emotional abuse.

If any part of the questionnaire causes distress then you are free to discontinue completion of the questionnaire by moving directly to the debrief sheet at the end of the survey. You can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally) or
Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

What will I do if I take part?

The survey is estimated to take between 10 and 20 minutes of your time. You will first be asked for your RPS number and then some demographic questions (sex and age), you will not be asked to reveal any personally identifying information. In the next part of the questionnaire, you will be asked to read a short piece of descriptive writing (vignette). Once you have fully read the vignette, you will proceed to the next page where you will be asked to rate some aspects of the vignette on a Likert scale (scale from 1-10). Please answer all questions, if you can. There is no right or wrong answer and your responses are anonymous. If you do not wish to answer a question, you can select "Prefer not to answer".

You can decide at any point to withdraw from the survey by advancing past the questions to the debrief sheet at the end of the survey. After 7 days, incomplete survey responses will be deleted.

Please do not discuss this study in detail with anyone else. Talking about how you responded could encourage another participant to change how they would normally respond.

How will my answers be used?

The responses will be aggregated and then analysed and reported on as part of my Master's dissertation. The data may also be published in an academic journal. No information will be taken that could identify you and so the data will be used anonymously.

Can I get more information?

You are welcome to contact me for more information before completing the online survey. My name is Nick and I can be contacted at 1601250@chester.ac.uk, alternatively you can contact my supervisor, Clea Wright at clea.wright@chester.ac.uk.

If you wish to proceed and consent to the data you provide being used, then please continue to the next page

Appendix C – Debrief sheet

Thank you for taking part in this study, your participation is appreciated.

The vignette that you read was allocated to you at random and may have included information that a child was at risk of being abused. Some vignettes included this information, some did not. The aim of the study was to see if ordinary people, with potentially no specialist knowledge or experience of child abuse, could spot the signs of sexual abuse in a child, if it was present.

This study could potentially be used to clarify common misperceptions about child sexual abuse and child sex offenders and help prevent child sexual abuse by providing valuable information to aid professionals who work with children.

Please do not discuss this study with anyone else. Knowledge of the focus of the study ahead of time could potentially change a participant's responses and thus invalidate the results.

If any part of the survey has caused distress you can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

It is important to remember that the vignette allocated to you may not have included any signs of child sexual abuse. However, in the event that information from the study has alerted you to the behaviour of someone you know, whether they are an adult or a child, the following organisations may be able to provide you with guidance.

Stop it Now! provides support, information and resources to potential abusers, their family and friends and well as professionals involved in the lives of children. They can be contacted via a confidential email service help@stopitnow.org.uk and aim to respond to all emails within 7 working days. Alternatively, their telephone line (0808 1000 900) is open 9am-9pm Monday to Thursday and 9am-5pm on Friday.

STOPSO provides support to potential sex offenders and their family members, aimed at preventing child sexual abuse. They can be contacted via their website at <https://www.stopso.org.uk/contact/> or via telephone: 07473 299883. (They provide no information on their website regarding operating hours or response times.)

If you would like further information about the study, you can contact me, Nick Goddard (1601250@chester.ac.uk) or my supervisor, Clea Wright (clea.wright@chester.ac.uk).

Appendix D – Contingency: Poster Text

Difficult situations online survey.

Help me to research this area by participating in an online study that will only take a few minutes of your time. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions. Please note that the vignette may potentially contain upsetting or distressing details. Please do not take part in the survey if you have ever been affected by: drug or alcohol abuse within the family or those close to you; mental health problems which have led to family problems or breakdowns; violence, or sexual or emotional abuse.

Contact Nick (1601250@chester.ac.uk) for further information.

Appendix E – Contingency: Facebook Post Text

Difficult situations online survey.

Hi. Would you like to complete my online survey? It's for my master's dissertation. Help me research difficult situations by completing an online survey. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions. Please note that the vignette may potentially contain upsetting or distressing details.

If you wish to take part, please private message me and I will send you further information.

Thanks ☐

Appendix F - all 6 versions of the vignette

Vignette 1 – Abuse included, no age

Peter is a charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 2 – Abuse included, 19

Peter is a 19-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 3 – Abuse included, 50

Peter is a 50-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 4 – no abuse, no age

Peter is a charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under

14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Vignette 5 – no abuse, 19

Peter is a 19-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Vignette 6 – no abuse, 50

Peter is a 50-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

When completing this form, please highlight the appropriate response to each question (e.g. underline, italicise, delete unwanted responses). Make any comments that you feel should be raised either next to each section or at the end in the general comments box.

Name of applicant: Nick Goddard

Project title: Spotting the signs of child sexual abuse.

Applicant status: UG PGT PGR Staff

1. Has the applicant signed and dated the form?

a) Yes / No → Return to applicant for signature before continuing with review process.

2. What is the submission type?

a) First submission to this or any other committee? Yes / No

b) Resubmission of a rejected application by this committee

- Is there a summary of the requirements of the committee and is the original application attached? Yes / No → Return to applicant for full details

c) Revised submission intended to replace an application approved by this committee

- Is the original application attached? Yes / No → Return to applicant for full details

d) First submission to this committee; has been submitted to another committee.

- Is the original application attached? Yes / No → Return to applicant for full details

3. Research Plan and Methodology (Qu 4, 6 & 7)

a) Are the timescales provided appropriate?

Yes / No Comments:

b) Are there contingency details?

Yes / No Comments:

c) Is the study well formulated in terms of drawing on the relevant literature and is it methodologically, analytically and scientifically sound?

Yes / No Comments:

d) Are appropriate debrief details provided?

Yes / No Comments:

e) Has the applicant provided appropriate details of where the research will take place?

Yes / No Comments:

f) Has the applicant provided appropriate details concerning data analysis?

Yes / No Comments:

4. Ethical Issues (Qu 9)

- a) Is there consideration of how to minimise, manage and monitor issues of distress and harm, however minor?
Yes / No Comments:
- b) Are appropriate details regarding the use and management of deception provided?
Yes / No / N/A Comments:
- c) Has the applicant provided appropriate details including regarding permission and appropriate health and safety information for conducting the study at the proposed location? Is the necessary documentation attached?
Yes / No Comments:
- d) Has the applicant provided an appropriate overview of how they would manage participant distress?
Yes / No / N/A (online study) Comments:

5. Sample size, participants and recruitment (Qu 10 – 14)

- a) Has the applicant provided appropriate details of the sample and how it will be identified?
Yes / No Comments:
- b) If using social media for recruitment have details been provided on
- a. Proposed sites
- Facebook ☐
- Twitter ☐
- Instagram ☐
- Other, please Specify
- Comments:
- b. Social media messages?
- Facebook ☐
- Twitter ☐
- Instagram ☐
- Other, please Specify
- Comments:
- c) Has the applicant provided appropriate details and attached the necessary documentation concerning their recruitment procedures? In particular, have they appropriately considered how to minimise, manage and monitor issues of distress and harm during recruitment?
Yes / No Comments:
- d) Are there appropriate details on the information sheet regarding the following (if applicable):
- | | |
|----------------------------------------------------------------------------------|-----------------------|
| • Purpose of the study | <u>Yes</u> / No / N/A |
| • Explanation of why participant has been chosen | <u>Yes</u> / No / N/A |
| • Details of materials/stimuli/qualitative topics | <u>Yes</u> / No / N/A |
| • Notification that materials used in the study are not diagnostic tools/therapy | <u>Yes</u> / No / N/A |
| • Notification that participation is voluntary | <u>Yes</u> / No / N/A |
| • Incentives/Compensation | <u>Yes</u> / No / N/A |
| • Informed consent | <u>Yes</u> / No / N/A |
| • Procedure | <u>Yes</u> / No / N/A |
| • Time commitment | <u>Yes</u> / No / N/A |
| • Right to not answer questions | <u>Yes</u> / No / N/A |
| • Withdrawal | <u>Yes</u> / No / N/A |

- How partially collected data will be used Yes / No / N/A
- Benefits and risks of participating Yes / No / N/A
- Anonymity Yes / No / N/A
- Confidentiality Yes / No / N/A
- Dissemination information Yes / No / N/A

6. Dissemination (Qu15)

- a) Has the applicant provided appropriate details concerning research dissemination?
Yes / No Comments:
- b) Are there appropriate details regarding any specific considerations about sharing the research?
Yes / No Comments:

7. Participant payments and inducements (Qu16)

- a) Are there appropriate details regarding compensation arrangements?
Yes / No / N/A Comments:

8. Debrief (Qu17)

- a) Are appropriate debrief details provided?
Yes / No / N/A Comments:
- b) Are there appropriate details about how participants will be debriefed should they decide to withdraw from an online study?
Yes / No / N/A (not online study) Comments:

9. Data Security (Qu18)

- a) Has the applicant provided appropriate details concerning data protection and storage?
Yes / No Comments:
- b) Have security issues been properly considered?
Yes / No Comments:
- c) Are there appropriate details regarding how privacy and confidentiality will be maintained during dissemination?
Yes / No Comments:

10. Forum-based projects

- a) Is the content of the website openly accessible?
Yes / No Comments:
- b) Has the applicant discussed what will happen with users who expressly state that they do not wish their responses to be used for research purposes?
Yes / No Comments:
- c) Has the applicant explained how online data collected will be anonymized?
Yes / No Comments:
- d) Has the applicant explained process of access, should the host website require posts to be posted through moderators?
Yes / No Comments:

- e) Has the applicant detailed how, where appropriate, they will ensure that age limits are met?
Yes / No Comments:

General comments: A well prepared application. The proposed project addresses a very sensitive topic, but the applicant has taken appropriate consideration of this, and the application is in line with similar research already being conducted in the department. Typo on PIS, end of 1st paragraph. Poster text needs contact details of supervisor.

Review status (please highlight one of the following):

Chair's action
Staff/PGR for full review
UG/PGT for full review
Work with external agencies
Work with vulnerable participants
Other issues/concerns

NAME: Clea Wright

ROLE: Supervisor / Reviewer 1 / Reviewer 2

DATE: 07/03/2018



When completing this form, please highlight the appropriate response to each question (e.g. underline, italicise, delete unwanted responses). Make any comments that you feel should be raised either next to each section or at the end in the general comments box.

Name of applicant: Nick Goddard

Project title: Spotting the signs of child sexual abuse.

Applicant status: UG PGT PGR Staff

1. Has the applicant signed and dated the form?

- a) Yes → Return to applicant for signature before continuing with review process.

2. What is the submission type?

- a) First submission to this or any other committee? Yes
- b) Resubmission of a rejected application by this committee
- Is there a summary of the requirements of the committee and is the original application attached? Yes / No → Return to applicant for full details
- c) Revised submission intended to replace an application approved by this committee
- Is the original application attached?: Yes / No → Return to applicant for full details
- d) First submission to this committee; has been submitted to another committee.
- Is the original application attached? Yes / No → Return to applicant for full details

3. Research Plan and Methodology (Qu 4, 6 & 7)

- a) Are the timescales provided appropriate?
Yes Comments:
- b) Are there contingency details?
Yes Comments:
- c) Is the study well formulated in terms of drawing on the relevant literature and is it methodologically, analytically and scientifically sound?
Yes Comments:
- d) Are appropriate debrief details provided?
Yes Comments:
- e) Has the applicant provided appropriate details of where the research will take place?
Comments:
- f) Has the applicant provided appropriate details concerning data analysis?
Yes Comments:

4. Ethical Issues (Qu 9)

- a) Is there consideration of how to minimise, manage and monitor issues of distress and harm, however minor?
Yes Comments:
- b) Are appropriate details regarding the use and management of deception provided?
Yes Comments:
- c) Has the applicant provided appropriate details including regarding permission and appropriate health and safety information for conducting the study at the proposed location? Is the necessary documentation attached?
NA Comments:
- d) Has the applicant provided an appropriate overview of how they would manage participant distress?
Yes (online study) Comments:

5. Sample size, participants and recruitment (Qu 10 – 14)

- a) Has the applicant provided appropriate details of the sample and how it will be identified?
Yes Comments:
- b) If using social media for recruitment have details been provided on
- a. Proposed sites
- | | |
|-----------------------|--------------------------|
| Facebook | X |
| Twitter | <input type="checkbox"/> |
| Instagram | <input type="checkbox"/> |
| Other, please Specify | |
- Comments:
- b. Social media messages?
- | | |
|-----------------------|--------------------------|
| Facebook | X |
| Twitter | <input type="checkbox"/> |
| Instagram | <input type="checkbox"/> |
| Other, please Specify | |
- Comments:
- c) Has the applicant provided appropriate details and attached the necessary documentation concerning their recruitment procedures? In particular, have they appropriately considered how to minimise, manage and monitor issues of distress and harm during recruitment?
Yes Comments:
- d) Are there appropriate details on the information sheet regarding the following (if applicable):
- | | |
|----------------------------------------------------------------------------------|-----|
| • Purpose of the study | Yes |
| • Explanation of why participant has been chosen | Yes |
| • Details of materials/stimuli/qualitative topics | Yes |
| • Notification that materials used in the study are not diagnostic tools/therapy | N/A |
| • Notification that participation is voluntary | Yes |
| • Incentives/Compensation | Yes |
| • Informed consent | Yes |
| • Procedure | Yes |
| • Time commitment | Yes |

• Right to not answer questions	Yes
• Withdrawal	Yes
• How partially collected data will be used	Yes
• Benefits and risks of participating	Yes
• Anonymity	Yes
• Confidentiality	Yes
• Dissemination information	Yes

6. Dissemination (Qu15)

- a) Has the applicant provided appropriate details concerning research dissemination?
Yes Comments: Not in much detail. Doesn't say anything about publications.
- b) Are there appropriate details regarding any specific considerations about sharing the research?
Yes Comments: Very limited

7. Participant payments and inducements (Qu16)

- a) Are there appropriate details regarding compensation arrangements?
N/A Comments:

8. Debrief (Qu17)

- a) Are appropriate debrief details provided?
Yes Comments:
- b) Are there appropriate details about how participants will be debriefed should they decide to withdraw from an online study?
Yes Comments:

9. Data Security (Qu18)

- a) Has the applicant provided appropriate details concerning data protection and storage?
Yes Comments:
- b) Have security issues been properly considered?
Yes Comments:
- c) Are there appropriate details regarding how privacy and confidentiality will be maintained during dissemination?
Yes Comments:

10. Forum-based projects

- a) Is the content of the website openly accessible?
Yes / No Comments:
- b) Has the applicant discussed what will happen with users who expressly state that they do not wish their responses to be used for research purposes?
Yes / No Comments:
- c) Has the applicant explained how online data collected will be anonymized?
Yes / No Comments:
- d) Has the applicant explained process of access, should the host website require posts to be posted through moderators

- | | |
|----------|-----------|
| Yes / No | Comments: |
|----------|-----------|
- e) Has the applicant detailed how, where appropriate, they will ensure that age limits are met?
- | | |
|----------|-----------|
| Yes / No | Comments: |
|----------|-----------|

General comments: I'm happy with this study. A couple of minor points:

1. , When collecting demographic information is it not more appropriate to measure gender rather than sex?
2. Appendix C Debrief states "The aim of the study was to see if ordinary people, with potentially no specialist knowledge or experience of child abuse, could spot the signs of sexual abuse in a child, if it was present." How does the applicant know that they have no experience/training in child abuse? Many places of work offer training on this as standard, eg. Lifeguards, teachers, Girl Guide leaders. This is more of a methodological comment rather than an ethical concern.

Review status (please highlight one of the following):

Chair's action
 Staff/PGR for full review
 UG/PGT for full review
 Work with external agencies
 Work with vulnerable participants
 Other issues/concerns

NAME: Dr Mandy Urquhart

ROLE: Reviewer 1

DATE: 6-March-2018



When completing this form, please highlight the appropriate response to each question (e.g. underline, italicise, delete unwanted responses). Make any comments that you feel should be raised either next to each section or at the end in the general comments box.

Name of applicant: Nick Goddard

Project title: Spotting the signs of child sexual abuse

Applicant status: UG PGT PGR Staff

1. Has the applicant signed and dated the form?

- a) **Yes** / No → Return to applicant for signature before continuing with review process.

2. What is the submission type?

- a) First submission to this or any other committee? **Yes** / No
- b) Resubmission of a rejected application by this committee
- Is there a summary of the requirements of the committee and is the original application attached? **Yes** / No → Return to applicant for full details
- c) Revised submission intended to replace an application approved by this committee
- Is the original application attached?: **Yes** / No → Return to applicant for full details
- d) First submission to this committee; has been submitted to another committee.
- Is the original application attached? **Yes** / No → Return to applicant for full details

3. Research Plan and Methodology (Qu 4, 6 & 7)

- a) Are the timescales provided appropriate?
Yes / No Comments:
- b) Are there contingency details?
Yes / No Comments:
- c) Is the study well formulated in terms of drawing on the relevant literature and is it methodologically, analytically and scientifically sound?
Yes / No Comments:
- d) Are appropriate debrief details provided?
Yes / No Comments:
- e) Has the applicant provided appropriate details of where the research will take place?
Yes / No Comments:
- f) Has the applicant provided appropriate details concerning data analysis?
Yes / No Comments:

4. Ethical Issues (Qu 9)

- a) Is there consideration of how to minimise, manage and monitor issues of distress and harm, however minor?
Yes / No Comments:
- b) Are appropriate details regarding the use and management of deception provided?
Yes / No / N/A Comments:
- c) Has the applicant provided appropriate details including regarding permission and appropriate health and safety information for conducting the study at the proposed location? Is the necessary documentation attached?
Yes / No Comments:
- d) Has the applicant provided an appropriate overview of how they would manage participant distress?
Yes / No / N/A (**online study**) Comments:

5. Sample size, participants and recruitment (Qu 10 – 14)

- a) Has the applicant provided appropriate details of the sample and how it will be identified?
Yes / No Comments:
- b) If using social media for recruitment have details been provided on
- a. Proposed sites
- | | |
|-----------------------|--------------------------|
| Facebook | X |
| Twitter | <input type="checkbox"/> |
| Instagram | <input type="checkbox"/> |
| Other, please Specify | |
- Comments:
- b. Social media messages?
- | | |
|-----------------------|--------------------------|
| Facebook | X |
| Twitter | <input type="checkbox"/> |
| Instagram | <input type="checkbox"/> |
| Other, please Specify | |
- Comments:
- c) Has the applicant provided appropriate details and attached the necessary documentation concerning their recruitment procedures? In particular, have they appropriately considered how to minimise, manage and monitor issues of distress and harm during recruitment?
Yes / No Comments:
- d) Are there appropriate details on the information sheet regarding the following (if applicable):
- | | |
|----------------------------------------------------------------------------------|-----------------------|
| • Purpose of the study | Yes / No / N/A |
| • Explanation of why participant has been chosen | Yes / No / N/A |
| • Details of materials/stimuli/qualitative topics | Yes / No / N/A |
| • Notification that materials used in the study are not diagnostic tools/therapy | Yes / No / N/A |
| • Notification that participation is voluntary | Yes / No / N/A |
| • Incentives/Compensation | Yes / No / N/A |
| • Informed consent | Yes / No / N/A |
| • Procedure | Yes / No / N/A |
| • Time commitment | Yes / No / N/A |
| • Right to not answer questions | Yes / No / N/A |
| • Withdrawal | Yes / No / N/A |

- How partially collected data will be used Yes / No / N/A
- Benefits and risks of participating Yes / No / N/A
- Anonymity Yes / No / N/A
- Confidentiality Yes / No / N/A
- Dissemination information Yes / No / N/A

6. Dissemination (Qu15)

- a) Has the applicant provided appropriate details concerning research dissemination?
 Yes / No Comments:
- b) Are there appropriate details regarding any specific considerations about sharing the research?
 Yes / No Comments:

7. Participant payments and inducements (Qu16)

- a) Are there appropriate details regarding compensation arrangements?
 Yes / No / N/A Comments:

8. Debrief (Qu17)

- a) Are appropriate debrief details provided?
 Yes / No / N/A Comments:
- b) Are there appropriate details about how participants will be debriefed should they decide to withdraw from an online study?
 Yes / No / N/A (not online study) Comments:

9. Data Security (Qu18)

- a) Has the applicant provided appropriate details concerning data protection and storage?
 Yes / No Comments:
- b) Have security issues been properly considered?
 Yes / No Comments:
- c) Are there appropriate details regarding how privacy and confidentiality will be maintained during dissemination?
 Yes / No Comments:

10. Forum-based projects

- a) Is the content of the website openly accessible?
 Yes / No Comments:
- b) Has the applicant discussed what will happen with users who expressly state that they do not wish their responses to be used for research purposes?
 Yes / No Comments:
- c) Has the applicant explained how online data collected will be anonymized?
 Yes / No Comments:
- d) Has the applicant explained process of access, should the host website require posts to be posted through moderators
 Yes / No Comments:

- e) Has the applicant detailed how, where appropriate, they will ensure that age limits are met?
Yes / No Comments:

General comments: Research focus of a sensitive nature but attention has been paid to potential issues as appropriate. Possible confound in the contents of the vignettes. Presumably the study uses the given website due to BOS not being able to administer the protocol but not explained. Do the committee need to see questions on vignettes?

Review status (please highlight one of the following):

Chair's action

Staff/PGR for full review

UG/PGT for full review

Work with external agencies

Work with vulnerable participants

Other issues/concerns

NAME: Liane Hayes

ROLE: Supervisor / Reviewer 1 / **Reviewer 2**

DATE: 14/03/2018

Approved Ethics Application

Dopec NGCW170418



University of
Chester

UNIVERSITY OF CHESTER, DEPARTMENT OF PSYCHOLOGY
APPLICATION FOR ETHICAL APPROVAL AMENDMENT FORM

A) Applicant and personnel

Applicant: Nick Goddard
Project title: Spotting the signs of child sexual abuse
Applicant status: ☐ Staff → Go to Section B ☐ PGR ☐ Undergraduate ☒ Postgraduate taught
Supervisor: Clea Wright

B) Declaration

1. ☒ I have submitted an application for ethical approval to the Department of Psychology Ethics Committee and I am required to make the following amendments to my application.
List the recommendations of the committee. 1. Typo on PIS, end of 1st paragraph. 2. Poster text needs contact details of supervisor. 3. When collecting demographic information is it not more appropriate to measure gender rather than sex? 4. How does the applicant know that [the participants] have no experience/training in child abuse? 5. Possible confound in the contents of the vignettes. 6. Presumably the study uses the given website due to BOS not being able to administer the protocol but not explained. 7. Do the committee need to see questions on vignettes?

Describe how you have addressed these requirements. 1. Typo corrected: word duplication removed from PIS. 2. Supervisor's contact details added to poster text. 3. Survey modified to measure gender rather than sex, please see screenshot of the amended question at the end of this document. 4. The following question was added to the end of the survey: "Do you have any experience of or training in identifying victims of child sexual abuse? This could be through a workplace or volunteer organisation, for example." With answer options of "Yes", "No" and "Prefer not to say". Please see screenshot at the end of this document. 5. Whilst football-related child sexual abuse (CSA) has been in the news recently, it would be difficult to find a profession connected with children, either directly or indirectly, that has not been associated with CSA. The author is aware of CSA committed by teachers, parents/family members, entertainers, sports coaches, priests, taxi drivers and social workers, in addition to the unknown professions of unreported offenders. Football is a popular sport in this country and so football coaching is not an unusual activity per se. 6. The following sentence was added to the third paragraph in section 7A: "BOS does not have the facility to randomly assign vignettes to participants and so an external questionnaire provider, www.qualtrics.com was selected for use". 7. A screenshot of the vignette questions is attached to the end of this document.

2. ☐ I have submitted an application for ethical approval to the Department of Psychology Ethics Committee that was approved on 26/03/2018
I wish the committee to consider the following amendments I would like to make to the research plan (attach the original approved application form) 1. Amend the debrief sheet so that the following instruction appears at the top of the page (in bold but the same font size as the rest of the sheet): "After you have read the debrief sheet, please make sure that your responses are saved by clicking the arrow at the bottom of this page." 2. As part of the recruitment contingency plan, post the request in the following Facebook groups, in addition to my own page: "University of Chester Psychology (Conversion) MSc 2017" and "Chester University Psychology Society C.U.P.S." Both groups are closed groups.

☐ I am a member of staff. **Signed:** _____ **Date:** Click here to enter a date.

Print the amendment form on BLUE PAPER and submit to the Dept. Office

☒ I am an UG/PGT/PGR student. I have discussed any amendments with my project supervisor.

Print the amendment form on BLUE PAPER and submit to the Dept. Office

Signed: NK (Lead Applicant) Date: Click here to enter a date.

11/4/79

Supervisor comments:

I have discussed the recommendations of the committee with the applicant and I am satisfied they have met the stated requirements./I support the amendments to the research plan. (delete as appropriate)

☒ Yes Sign and date the form ☐ No Comments: Click here to enter text.

Signed: [Signature] (Supervisor) Date: Click here to enter a date.

11/04/2018

COMMITTEE COMMENTS:

☒ **ACCEPTABLE:** You may now commence with data collection subject to approval from any relevant external agencies.

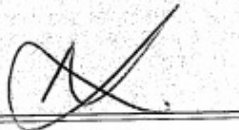
DATA COLLECTION IS NOT PERMISSABLE UNDER THESE CONDITIONS

☐ **ACCEPTABLE SUBJECT TO SUBMISSION OF FURTHER AMENDMENT FORM.**

☐ Acceptable subject to conditions listed by chair. Discuss conditions highlighted with supervisor and submit ethics application amendment form direct to office.

☐ Acceptable subject to conditions listed by chair: Submit ethics application amendment form direct to office.

Signed:



Date: *17/4/18*
Click here to enter a date.

Please indicate the gender you most identify with:

Male

Female

Please indicate your age

0 10 20 30 40 50 60 70 80 90 100

Age



Please rate the vignette for the potential for the following kinds of abuse, from 0 (no abuse present) to 10 (abuse definitely present):

0 1 2 3 4 5 6 7 8 9 10

Verbal

☐ No reponse.



Financial

☐ No reponse.



Sexual

☐ No reponse.



Emotional

☐ No reponse.



Physical

☐ No reponse.



Do you have any experience of or training in identifying victims of child sexual abuse? This could be through a workplace or volunteer organisation, for example.

Yes

No

Prefer not to say



Staff / Office Use Only

DOPEC NUMBER: *Click here to enter text.*

Umbrella project DOPEC number (staff) *Click here to enter text.*

APPLICANT SURNAME Goddard

APPLICANT: UG ☐ PGT ☒ PGR ☐ Staff ☐
REVIEW PROCESS: Accelerated ☐ Full ☒
APPLICATION STATUS: New application ☒ Major amendment ☐ Resubmission ☐
APPLICATION FOR: Dissertation ☒ Teaching ☐ Research & publication ☒
ATTENDANCE AT HEALTH & SAFETY BRIEFING: Yes ☒ No ☐ N/A ☐
INCLUSION OF RISK ASSESSMENT FORM: Yes ☐ No ☒ N/A ☐

NOTES ON THE ROLE AND FUNCTION OF THE DEPARTMENT OF PSYCHOLOGY ETHICS COMMITTEE.

- All decisions of the committee are based on the application form and reviewers comments ONLY. Forms should be as detailed and clear as possible. Verbal discussions are not considered as part of the application or review process.
- The review process strictly adheres to the University of Chester Research Governance Handbook and the BPS Code of Ethics.
- The decision of the committee is final. If you are a UG, PGT or PGR student you should discuss the decision of the committee with your supervisor. If you are a member of staff you may contact the chair of the committee for further clarification.

Before completing the form researchers are expected to familiarise themselves with the regulatory codes and codes of conduct and ethics relevant to their areas of research, including those of relevant professional organisations and ensure that research which they propose is designed to comply with such codes.

Department of Psychology Ethical Approval for Research: Procedural Guidelines.

University of Chester Research Governance Handbook

http://ganymede2.chester.ac.uk/view.php?title_id=522471

BPS Code of Ethics

http://www.bps.org.uk/system/files/Public%20files/bps_code_of_ethics_2009.pdf

BPS Code of Human Research Ethics

http://www.bps.org.uk/sites/default/files/documents/code_of_human_research_ethics.pdf

BPS Guidelines for Internet-mediated Research

<http://www.bps.org.uk/system/files/Public%20files/inf206-guidelines-for-internet-mediated-research.pdf>

BPS Research Guidelines and Policy Documents

<http://www.bps.org.uk/publications/policy-and-guidelines/research-guidelines-policy-documents/research-guidelines-poli>

Any queries email: n.davies@chester.ac.uk or psychology_ethics@chester.ac.uk

CHECK LIST.

Please complete the form below indicating attached materials. Prior to submission supervisors must confirm that they have reviewed the application by completing the supervisors column.

<i>Notes: Students to indicate where information is found, supervisor to confirm by ticking green column</i>	<u>Supervisor</u> <u>confirmation</u>	<u>Information</u> <u>sheet</u>	<u>Letter</u>	<u>Email</u>	<u>Email info.</u> <u>page</u>	<u>Consent</u> <u>Form</u>	<u>PowerPoint</u>	<u>N/A</u>
Brief details about the purpose of the study	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact details for further information	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation of how and why participant has been chosen	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notification that materials/interviews are not diagnostic tools/therapy or used for staff review/development purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Explanation participation is voluntary	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of any incentives or compensation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of how consent will be obtained	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If research is observational, consent to being observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Details of procedure so participants are informed about what to expect	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of time commitments expected	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of any stimuli used	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation of right to withdraw and right to withdraw procedure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option for omitting questions participant does not wish to answer	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Procedure regarding partially completed questionnaires or interviews	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With interviews, information regarding time limit for withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Details of any advantages and benefits of taking part	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Details of any disadvantages and risks of taking part	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information that data will be treated with full confidentiality and that, if published, those data will not be identifiable as theirs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Debriefing details	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dissemination information	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Further Information (relevant literature; support networks etc)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Supervisor Signature: Clea Wright

Date :05/03/2018



University of
Chester

DEPARTMENT OF PSYCHOLOGY
APPLICATION TO
DEPARTMENTAL ETHICS
COMMITTEE

WHEN COMPLETING THE FORM PLEASE REFER TO THE DOP ETHICS PROCEDURAL
GUIDELINES HANDBOOK.

UG AND PGT STUDENTS CAN ACCESS A COPY ON THEIR RELEVANT MOODLE PAGE.

PGR AND STAFF SHOULD CONTACT n.davies@chester.ac.uk or
psychology_ethics@chester.ac.uk

1. Working title of the study

Notes: The title should be a single sentence
Spotting the signs of child sexual abuse.

2. Applicant name and contact details

Notes: The primary applicant is the name of the person who has overall responsibility for the study. Include their appointment or position held and their qualifications. For studies where students and/or research assistants will undertake the research, the primary applicant is the student (UG, PGT, PGR) and supervisor is the co-applicant.
Nick Goddard. 1601250@chester.ac.uk

3. Co-applicants

Notes: List the names of all researchers involved in the study. Include their appointment or position held and their qualifications
Clea Wright, Supervisor. clea.wright@chester.ac.uk

4. Start and end dates of the study

Notes: The title should be a single sentence
March 2018 – 26 Sep 2018

5. Is this project subject to external funding?

Notes: Please provide details of the funding body, grant application and PI.
No

6. Briefly describe the purpose and rationale of the research

Notes: (Maximum 300 words). In writing the rationale make sure that the research proposed is grounded in relevant literature, and the hypotheses emerge from recent research and are logically structured.

If this application is for a PGR/Staff funded project please attach any detailed research proposals as appropriate.

A review of the literature on sex offenders suggests that members of the public, to a greater extent (and likely as a result of the actions of the media, particularly print media), subscribe to a stereotypical view of a sex offender (Gakhal & Brown, 2011; King & Roberts, 2015; Levenson, Brannon, Fortney & Baker, 2007). Whilst this stereotype has many facets and is subject to some variation, a common view is that sex offences (including child sex offenses) are primarily committed by older males (Sanghara & Wilson, 2006; Thakker, 2012). In reality, whilst offenses are committed primarily by men, the men can be of any age or demographic (Elliot, Browne & Kilcoyne, 1995; Sanghara & Wilson, 2006).

The aim of this study is to determine if the stereotype hinders identification of a situation where child sex abuse could potentially be taking place. The participant will be presented with one of six versions of a vignette via an online questionnaire. The six versions will take account of the following independent variables:

Signs of sexual abuse (included/not included)

Age of involved male (not disclosed - control/19 - Young/50 - Old)

The participant will be asked to rate each vignette for the potential for verbal, physical, financial, emotional and sexual abuse.

See Appendix F for all 6 versions of the vignette.

This will allow me to test the following hypotheses:

- 1) If the age of the offender is shown as 19 (Young condition) participants' rating of the potential for sexual abuse will be lower than if the age is shown as 50 (Old condition).
- 2) Given the stereotypical view of sex offenders, the ratings for the control (no age given) will be similar to that given in the Old condition.

The data will be analysed using two 1x3 ANOVAs, one for the abuse included condition, one for the abuse not included condition. Significant results may be further analysed using post-hoc t-tests.

7a. Describe the methods and procedures of the study

Notes: (Maximum 500 words) Attach any relevant material (questionnaires, supporting information etc.) as appendices and summarise them briefly here (e.g. Cognitive Failures Questionnaire: a standardised self-report measure on the frequency of everyday cognitive slips). Do not merely list the names of measures and/or their acronyms. Include information about any interventions, interview schedules, duration, order and frequency of assessments. It should be clear exactly what will happen to participants. If this is a media based study describe and list materials include links and sampling procedure.

Participants will be recruited via the SONA system and offered two RPS credits for participation. It will be made clear to participants that the study may involve them reading potentially distressing information and directs potential participants to sources of support within and outside of the university. If they are happy to proceed, a link to the online questionnaire is provided. Please see Appendix A: Recruitment text to be used on SONA.

The first page of the online questionnaire (https://qtrial2018q1az1.az1.qualtrics.com/jfe/form/SV_5yvriauJBsGSWeF) contains the text of the participant information sheet (see Appendix B). This again warns of the potential to be exposed to distressing information and directs potential participants to sources of support, both externally and within the university. It is made clear that participants can withdraw their participation at any time and that partially completed surveys will be deleted. Participants will be able to access the debrief sheet if they withdraw part way through the survey.

The participant will then be asked for their RPS number and their sex and age. Participants will not be asked to reveal any personally identifying information. In the next part of the questionnaire, the participants will be asked to read their vignette, which has been randomly allocated by the questionnaire. BOS does not have the facility to randomly assign vignettes to participants and so an external questionnaire provider, www.qualtrics.com was selected for use. Care has been taken to ensure that, whilst allocated randomly, all vignettes will be presented approximately evenly. Once the participant has fully read the vignette, the participant will advance to the next page and they will be asked to rate the likelihood of the potential for verbal, financial, sexual, emotional and physical abuse (in that order) on a 10-point Likert scale. All questions have a "Prefer not to answer" option. Participants will then be presented with the debrief sheet (see Appendix C), which will explain why the focus of the study was not made more explicit at the beginning and direct the participant to sources of support both within and outside the university. The debrief sheet will make it clear that the vignette may not have contained details of potential child sex abuse but if the participant is concerned, the name and contact details of two specialist organisations that can provide support and guidance are listed. See Appendix F for all 6 versions of the vignette. The vignettes have previously been approved by the ethics committee for other studies and have been subject to only minor modification for this study.

7b. Provide details of your contingency plan

Notes: Please briefly describe your contingency plan. (100 words)

Should not enough participants be recruited directly via the SONA system, posters will be placed around the Psychology building and Parkgate campus as a whole. These posters will include a generic clipart or image that indicates "research" or "questionnaire". See Appendix D for text used.

Should this be unsuccessful, the recruitment process will be extended to include individuals personally known to the researcher, by placing a post on the applicant's Facebook page (see Appendix E).

8. Provide details of the previous experience of the procedures by the person conducting the study.

Notes: Say who will be undertaking the procedures involved and what training and/or experience they have. If supervision is necessary, indicate who will provide it.

My supervisor has experience in conducting this sort of research.

9. Describe the ethical issues raised by this study and discuss the measures taken to address them.

Notes: Describe any discomfort or inconvenience that participants may experience.

Include information about procedures that for some people could be physically stressful or might impact on the safety of participants, e.g. interviews, probing questions, noise levels, visual stimuli, equipment; or that for some people could be psychologically stressful, e.g.

mood induction procedures, tasks with high failure rate, please include your distress protocol. Discuss any issues of anonymity and confidentiality as they relate to your study, refer to ethics handbook and guidance notes at the end of the form. If animal based include ethical issues relating to observation.

The task may pose some psychological distress by anyone who has been personally affected by abuse. Participants are informed that the research is on a potentially sensitive topic and any potential participants who have been personally affected by abuse or mental health problems are directed to not undertake the study, both in the recruitment text and Participant Information Sheet. Sources of support within and outside the university are listed in the recruitment text, the Participant Information Sheet and the Debrief sheet. Participants are directed to discontinue participation if they feel any distress.

In order for their responses to be unaffected by foreknowledge of the focus of the study, the recruitment text and debrief sheet mentioned only that this is a study on difficult situations, and not that it specifically looks at child sexual abuse. One possibility is that participation in this research could lead a participant to become aware of the suspicious behaviour of someone they know. Whilst this in itself might be a very good thing and prevent or stop actual abuse, this could be difficult or distressing for participants and care will be taken to ensure that they are provided with suitable advice and support.

10. Describe the participants of the study.

Notes: Describe the groups of participants that will be recruited and the principal eligibility criteria and ineligibility criteria. Make clear how many participants you plan to recruit into the study in total.

Psychology students at the University of Chester are the primary group of participants. Should the contingency plan be activated, the pool of potential participants will be widened to include other members of the university population, as posters will be placed around Parkgate Road campus, and persons over the age of 18 directly known to the researcher, as it may be advertised on Facebook.

The primary eligibility criteria are that participants are over the age of 18 and must not have been affected by any kind of abuse or mental health problems.

I plan to recruit a minimum of 60 participants into the study. The online questionnaire tool permits access to a maximum of 100 responses in their free plan, including responses generated during the testing and ethics application phase. As a result, I anticipate the maximum number of responses to be 92. Should the questionnaire gain significantly more response, I will consider purchasing a paid plan for which I will meet the payment requirements.

11. Describe the participant recruitment procedures for the study.

Notes: Gives details of how potential participants will be identified or recruited, please list any social media platforms that you will use and the message. Include all other advertising materials (posters, emails, letters, verbal script etc.) as appendices and refer to them as appropriate. Describe any screening examinations. If it serves to explain the procedures better, include as an appendix a flow chart and refer to it.

Potential participants will be recruited from the SONA system in the first instance using the text shown in Appendix A. Should the contingency plan be activated, posters will be placed around the Psychology building and Parkgate campus as a whole. These posters will include a generic clipart or image that indicates "research" or "questionnaire". See Appendix D for text to be used. Should further participants be required, as per the contingency plan, the recruitment process will be

extended to include individuals personally known to the researcher, via a post on Facebook. The text of which forms Appendix E.

12. Describe the procedures to obtain informed consent

*Notes: Describe when consent will be obtained. If consent is from **adult participants**, give details of who will take consent and how it will be done. If you plan to seek informed consent from **vulnerable groups** (e.g. people with learning difficulties, victims of crime), say how you will ensure that consent is voluntary and fully informed.*

*If you are recruiting **children or young adults** (aged under 18 years) specify the age-range of participants and describe the arrangements for seeking informed consent from a person with parental responsibility. If you intend to provide children under 16 with information about the study and seek agreement, outline how this process will vary according to their age and level of understanding.*

How long will you allow potential participants to decide whether or not to take part?

What arrangements have been made for people who might not adequately understand verbal explanations or written information given in English, or who have special communication needs?

If you are not obtaining consent, explain why not.

Participants will be informed that if they advance past the Participant Information sheet, they are providing their consent. Consent can be withdrawn at any time by failing to complete the questionnaire. Incomplete responses will be deleted.

13. Will consent be written?

Yes ☐ No ☒

*Notes: If **yes**, include a consent form as an appendix. If **no**, describe and justify an alternative procedure (verbal, electronic etc.) in the space below.*

Guidance on how to draft Participant Information sheet and Consent form can be found on PS6001 Moodle space and in the Handbook.

Participants are advised that if they click on the link to the survey and advance to the page after the Participant Information Sheet, they are providing their consent. Consent can be withdrawn at any time by failing to complete the questionnaire. Incomplete responses will be deleted. Whilst participants are asked to preferably complete all questions, participants have the option to select "Prefer not to answer" and this is made clear to the participant. Once a full set of responses have been submitted, due to the anonymous nature of the information provided, it is not possible for a participant to withdraw consent.

14. Describe the information given to participants. Indicate if and why any information on procedures or purpose of the study will be withheld.

Notes: Include an Information Sheet that sets out the purpose of the study and what will be required of the participant as appendices and refer to it as appropriate. If any information is to be withheld, justify this decision. More than one Information Sheet may be necessary.

Whilst participants are aware that the study is on difficult situations (as per Appendices A-E), the exact focus of the study is not revealed until the debrief sheet. This is to try to avoid the participant

from being biased in their response as to the likelihood of sexual abuse in the vignette they were presented with.

15. Indicate if any personally identifiable information is to be made available beyond the research team. (eg: a report to an organisation)

Notes: If so, indicate to whom and describe how confidentiality and anonymity will be maintained at all stages.

The data is anonymised, no participant can be identified from the information they provide.

16. Describe any payments, expenses or other benefits and inducements offered to participants.

Notes: Give details. If it is monetary say how much, how it will be paid and on what basis is the amount determined. Indicate RPS credits.

Two RPS credits.

17. Describe the information about the investigation given to participants at the end of the study.

Notes: Give details of debriefings, ways of alleviating any distress that might be caused by the study and ways of dealing with any clinical problem that may arise relating to the focus of the study.

At the end of the study, the exact focus of the study is revealed and what the information could be used for. Participants are directed to support organisations for general emotional distress and specialist organisations that can help if they have questions regarding child sex abuse. It is made repeatedly clear to the participant that the vignette they were allocated may not have included any signs of abuse. See Appendix C for debrief sheet.

18. Describe data security arrangements for during and after the study.

Notes: Digital data stored on a computer requires compliance with the Data Protection Act; indicate if you have discussed this with your supervisor and describe any special circumstances that have been identified from that discussion. Say who will have access to participants' personal data and for how long personal data will be stored or accessed after the study has ended.

No personal data on participants is requested and so none will be stored. The researcher has access the survey responses via the questionnaire website, which is protected by a username/password. The responses will be coded for analysis by SPSS. The SPSS data file will be held securely on the researcher's home computer and a backup securely stored online, protected by a username/password.

SIGNATURES OF THE RESEARCH TEAM

Notes: The primary applicant and all co-applicants must sign and date the form. Scanned or electronic signatures are acceptable.

Nick Goddard

03/03/2018

Clea Wright

ETHICS COMMITTEE DATE

[Click here to enter a date.](#)

☐ **ACCEPTABLE**

You may now commence data collection subject to approval from any relevant external agencies.

CHAIRS COMMENTS

☐ Read and review all reviewers comments

DATA COLLECTION IS NOT PERMISSABLE UNDER THE FOLLOWING 3 CONDITIONS. Please address the issues indicated.

☐ **ACCEPTABLE SUBJECT TO SUBMISSION OF AMENDMENT FORM**

UG and PG students should discuss any recommendations with their supervisors.

☐ **ACCEPTABLE SUBJECT TO CONDITIONS OF CHAIR**

Resubmit application for full review after addressing the issues described, ensuring you have indicated on the front page of the form that this is a resubmission.

☐ **REVISE AND RESUBMIT**

Resubmit application for full review ensuring you have indicated on the front page of the form that this is a resubmission

SIGNATURE: [Click here to enter text.](#)

Appendix A: Recruitment text to be used on SONA

Difficult situations

This study is open to anyone over the age of 18 and any Psychology student at the University of Chester will earn 2 RPS points for participating. Participation in the study will involve reading information that may potentially contain distressing details. Please do not complete in the survey if you have ever been affected by:

Drug or alcohol abuse within the family or those close to you.

Mental health problems which have led to family problems or breakdowns.

Violence, or sexual or emotional abuse.

If you are affected by any of these issues, then you can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

If you agree to take part in the study, you will be directed to an external website. You will be asked to read a short piece of descriptive writing (vignette) and subsequently answer questions based on the vignette. You can withdraw participation before at any time by advancing past the questions to the debrief sheet. Any partially completed responses will be discarded and later deleted.

https://qtrial2018q1az1.az1.qualtrics.com/jfe/form/SV_5yvriauJBsGSWeF

Appendix B: Participant Information Sheet

Online survey into how we understand difficult situations

This study is open to anyone over the age of 18 and University of Chester Psychology students can earn 2 RPS points for taking part. Participation is entirely voluntary. This study involves reading a short piece of descriptive writing (vignette) and then answering questions on the vignette you have just read. The vignette may potentially contain distressing (or triggering) information. Please do not take part if you are or have ever been affected by:

Drug or alcohol abuse within the family or those close to you.

Mental health problems which have led to family problems or breakdowns.

Violence, or sexual or emotional abuse.

If any part of the questionnaire causes distress then you are free to discontinue completion of the questionnaire by moving directly to the debrief sheet at the end of the survey. You can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally) or

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

What will I do if I take part?

The survey is estimated to take between 10 and 20 minutes of your time. You will first be asked for your RPS number and then some demographic questions (sex and age), you will not be asked to reveal any personally identifying information. In the next part of the questionnaire, you will be asked to read a short piece of descriptive writing (vignette). Once you have fully read the vignette, you will proceed to the next page where you will be asked to rate some aspects of the vignette on a Likert scale (scale from 1-10). Please answer all questions, if you can. There is no right or wrong answer and your responses are anonymous. If you do not wish to answer a question, you can select "Prefer not to answer".

You can decide at any point to withdraw from the survey by advancing past the questions to the debrief sheet at the end of the survey. After 7 days, incomplete survey responses will be deleted.

Please do not discuss this study in detail with anyone else. Talking about how you responded could encourage another participant to change how they would normally respond.

How will my answers be used?

The responses will be aggregated and then analysed and reported on as part of my Master's dissertation. The data may also be published in an academic journal. No information will be taken that could identify you and so the data will be used anonymously.

Can I get more information?

You are welcome to contact me for more information before completing the online survey. My name is Nick and I can be contacted at 1601250@chester.ac.uk, alternatively you can contact my supervisor, Clea Wright at clea.wright@chester.ac.uk.

If you wish to proceed and consent to the data you provide being used, then please continue to the next page

Appendix C – Debrief sheet

Thank you for taking part in this study, your participation is appreciated.

The vignette that you read was allocated to you at random and may have included information that a child was at risk of being abused. Some vignettes included this information, some did not. The aim of the study was to see if ordinary people, with potentially no specialist knowledge or experience of child abuse, could spot the signs of sexual abuse in a child, if it was present.

This study could potentially be used to clarify common misperceptions about child sexual abuse and child sex offenders and help prevent child sexual abuse by providing valuable information to aid professionals who work with children.

Please do not discuss this study with anyone else. Knowledge of the focus of the study ahead of time could potentially change a participant's responses and thus invalidate the results.

If any part of the survey has caused distress you can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

It is important to remember that the vignette allocated to you may not have included any signs of child sexual abuse. However, in the event that information from the study has alerted you to the behaviour of someone you know, whether they are an adult or a child, the following organisations may be able to provide you with guidance.

Stop it Now! provides support, information and resources to potential abusers, their family and friends and well as professionals involved in the lives of children. They can be contacted via a confidential email service help@stopitnow.org.uk and aim to respond to all emails within 7 working days. Alternatively, their telephone line (0808 1000 900) is open 9am-9pm Monday to Thursday and 9am-5pm on Friday.

STOPSO provides support to potential sex offenders and their family members, aimed at preventing child sexual abuse. They can be contacted via their website at <https://www.stopso.org.uk/contact/> or via telephone: 07473 299883. (They provide no information on their website regarding operating hours or response times.)

If you would like further information about the study, you can contact me, Nick Goddard (1601250@chester.ac.uk) or my supervisor, Clea Wright (clea.wright@chester.ac.uk).

Appendix D – Contingency: Poster Text

Difficult situations online survey.

Help me to research this area by participating in an online study that will only take a few minutes of your time. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions. Please note that the vignette may potentially contain upsetting or distressing details. Please do not take part in the survey if you have ever been affected by: drug or alcohol abuse within the family or those close to you; mental health problems which have led to family problems or breakdowns; violence, or sexual or emotional abuse.

Contact Nick (1601250@chester.ac.uk) for further information.

Supervisor: Clea Wright (clea.wright@chester.ac.uk)

Appendix E – Contingency: Facebook Post Text

Difficult situations online survey.

Hi. Would you like to complete my online survey? It's for my master's dissertation. Help me research difficult situations by completing an online survey. The study will involve reading a short piece of descriptive text (vignette) and answering a few short questions. Please note that the vignette may potentially contain upsetting or distressing details.

If you wish to take part, please private message me and I will send you further information.

Thanks 😊

Appendix F - all 6 versions of the vignette

Vignette 1 – Abuse included, no age

Peter is a charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 2 – Abuse included, 19

Peter is a 19-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 3 – Abuse included, 50

Peter is a 50-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 4 – no abuse, no age

Peter is a charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under

14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Vignette 5 – no abuse, 19

Peter is a 19-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Vignette 6 – no abuse, 50

Peter is a 50-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Subsequent Amendment 1



University of
Chester

UNIVERSITY OF CHESTER, DEPARTMENT OF PSYCHOLOGY
APPLICATION FOR ETHICAL APPROVAL AMENDMENT FORM

A) Applicant and personnel

Applicant: Nick Goddard

Project title: Spotting the signs of child sexual abuse

Applicant status: ☐ Staff → Go to Section B ☐ PGR

☐ Undergraduate

☒ Postgraduate taught

Supervisor: Clea Wright

B) Declaration

1. ☐ I have submitted an application for ethical approval to the Department of Psychology Ethics Committee and I am required to make the following amendments to my application.

List the recommendations of the committee. [Click here to enter text.](#)

Describe how you have addressed these requirements. [Click here to enter text.](#)

2. ☒ I have submitted an application for ethical approval to the Department of Psychology Ethics Committee that was approved on 17/04/2018

I wish the committee to consider the following amendments I would like to make to the research plan (attach the original approved application form) 1. To amend the social media recruitment procedure to allow me recruit via personal message to WhatsApp individuals or groups, using the Facebook Post text (Appendix E). 2. To allow me to use twitter to link to the previously approved recruitment posts via Facebook. Due to Twitter message constraints, the text will be "Hi. Would you like to complete my online survey? It's for my master's dissertation. Help me research difficult situations by completing an online survey." And then a link to the full post on Facebook. 3. To allow recruitment via a message on Portal, using the Facebook Post text (Appendix E).

☐ I am a member of staff. Signed: _____ Date: [Click here to enter a date.](#)
Print the amendment form on BLUE PAPER and submit to the Dept. Office

☒ I am an UG/PGT/PGR student. I have discussed any amendments with my project supervisor.
Print the amendment form on BLUE PAPER and submit to the Dept. Office

Signed: M (Lead Applicant) Date: 11/7/18 [Click here to enter a date.](#)

Supervisor comments:
I have discussed the recommendations of the committee with the applicant and I am satisfied they have met the stated requirements. I support the amendments to the research plan. (delete as appropriate)

☒ Yes Sign and date the form ☐ No Comments: [Click here to enter text.](#)

Signed: [Signature] (Supervisor) Date: 10-07-2018 [Click here to enter a date.](#)

COMMITTEE COMMENTS:

☒ **ACCEPTABLE:** You may now commence with data collection subject to approval from any relevant external agencies.

DATA COLLECTION IS NOT PERMISSABLE UNDER THESE CONDITIONS

☐ **ACCEPTABLE SUBJECT TO SUBMISSION OF FURTHER AMENDMENT FORM.**

☐ Acceptable subject to conditions listed by chair. Discuss conditions highlighted with supervisor and submit ethics application amendment form direct to office.

☐ Acceptable subject to conditions listed by chair: Submit ethics application amendment form direct to office.

Signed: _____



Date: 16/7/18

Subsequent Amendment 2



University of
Chester

UNIVERSITY OF CHESTER, DEPARTMENT OF PSYCHOLOGY
APPLICATION FOR ETHICAL APPROVAL AMENDMENT FORM

A) Applicant and personnel

Applicant: Nick Goddard

Project title: Spotting the signs of child sexual abuse

Applicant status: ☐ Staff → Go to Section B ☐ PGR ☐ Undergraduate ☒ Postgraduate taught

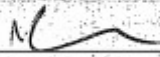
Supervisor: Clea Wright

B) Declaration

- ☐ I have submitted an application for ethical approval to the Department of Psychology Ethics Committee and I am required to make the following amendments to my application.
List the recommendations of the committee. [Click here to enter text.](#)
Describe how you have addressed these requirements. [Click here to enter text.](#)
- ☒ I have submitted an application for ethical approval to the Department of Psychology Ethics Committee that was approved on 17/04/2018
I wish the committee to consider the following amendments I would like to make to the research plan (attach the original approved application form) I would like to expand recruitment to include the posting of a topic on the Chester University staff discussion board. The topic would have the title "Participants needed for my online masters survey". The body of the topic would comprise the Facebook Post Text (Appendix E) with the penultimate line modified to "If you wish to take part, please e-mail me at n.goddard@chester.ac.uk and I will send you further information."


☐ I am a member of staff. **Signed:** _____ **Date:** [Click here to enter a date.](#)
Print the amendment form on BLUE PAPER and submit to the Dept. Office

☒ I am an UG/PGT/PGR student. I have discussed any amendments with my project supervisor.
Print the amendment form on BLUE PAPER and submit to the Dept. Office

Signed:  _____ **(Lead Applicant) Date:** 25/7/18 [Click here to enter a date.](#)

Supervisor comments:
I have discussed the recommendations of the committee with the applicant and I am satisfied they have met the stated requirements. I support the amendments to the research plan. (delete as appropriate)

☒ Yes Sign and date the form ☐ No **Comments:** [Click here to enter text.](#)

Signed:  _____ **(Supervisor) Date:** 24/07/2018

COMMITTEE COMMENTS:

☒ **ACCEPTABLE:** You may now commence with data collection subject to approval from any relevant external agencies.

DATA COLLECTION IS NOT PERMISSABLE UNDER THESE CONDITIONS

☐ **ACCEPTABLE SUBJECT TO SUBMISSION OF FURTHER AMENDMENT FORM.**

☐ Acceptable subject to conditions listed by chair. Discuss conditions highlighted with supervisor and submit ethics application amendment form direct to office.

☐ Acceptable subject to conditions listed by chair: Submit ethics application amendment form direct to office.

Signed:



Date: Click here to enter a date.

1/8/18.

Appendix E – Participant Information Sheet

Online survey into how we understand difficult situations

This study is open to anyone over the age of 18 and University of Chester Psychology students can earn 2 RPS points for taking part. Participation is entirely voluntary. This study involves reading a short piece of descriptive writing (vignette) and then answering questions on the vignette you have just read. The vignette may potentially contain distressing (or triggering) information. Please do not take part if you are or have ever been affected by:

Drug or alcohol abuse within the family or those close to you.

Mental health problems which have led to family problems or breakdowns.

Violence, or sexual or emotional abuse.

If any part of the questionnaire causes distress then you are free to discontinue completion of the questionnaire by moving directly to the debrief sheet at the end of the survey. You can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)
or

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

What will I do if I take part?

The survey is estimated to take between 10 and 20 minutes of your time. You will first be asked for your RPS number and then some demographic questions (sex and age), you will not be asked to reveal any personally identifying information. In the next part of the questionnaire, you will be asked to read a short piece of descriptive writing (vignette). Once you have fully read the vignette, you will proceed to the next page where you will be asked to rate some aspects of the vignette on a Likert scale (scale from 1-10). Please answer all questions, if you can. There is no right or wrong answer and your responses are anonymous. If you do not wish to answer a question, you can select "Prefer not to answer".

You can decide at any point to withdraw from the survey by advancing past the questions to the debrief sheet at the end of the survey. After 7 days, incomplete survey responses will be deleted.

Please do not discuss this study in detail with anyone else. Talking about how you responded could encourage another participant to change how they would normally respond.

How will my answers be used?

The responses will be aggregated and then analysed and reported on as part of my Master's dissertation. The data may also be published in an academic journal. No information will be taken that could identify you and so the data will be used anonymously.

Can I get more information?

You are welcome to contact me for more information before completing the online survey. My name is Nick and I can be contacted at 1601250@chester.ac.uk, alternatively you can contact my supervisor, Clea Wright at clea.wright@chester.ac.uk .

If you wish to proceed and consent to the data you provide being used, then please continue to the next page

Appendix F – Screenshots of Survey Questions

If you are a University of Chester Psychology student, please enter your RPS number.

Please indicate the gender you most identify with:

Male

Female

Please indicate your age

0 10 20 30 40 50 60 70 80 90 100

Age



Please rate the vignette for the potential for the following kinds of abuse, from 0 (no abuse present) to 10 (abuse definitely present):

0 1 2 3 4 5 6 7 8 9 10

Verbal ☐ No reponse.



Financial ☐ No reponse.



Sexual ☐ No reponse.



Emotional ☐ No reponse.



Physical ☐ No reponse.



Do you have any experience of or training in identifying victims of child sexual abuse? This could be through a workplace or volunteer organisation, for example.

Yes

No

Prefer not to say

Appendix G – All 6 Versions of the Vignette.

Vignette 1 – Abuse included, no age

Peter is a charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 2 – Abuse included, 19

Peter is a 19-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 3 – Abuse included, 50

Peter is a 50-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. They get on well and Tony felt comfortable in telling Peter about his and his mates' relationships with local girls. Peter offered advice about contraception and he was always complimentary about Tony's athletic physique and clean-living lifestyle. Tony felt flattered. As a development in the training, Peter has asked if Tony would like to visit his home to view footage of famous footballers in order to improve on his game strategy. Peter has also said that they could watch other movies too, as a reward for

Tony's hard work. One evening, when they had worked hard, Peter poured himself a glass of wine and offered Tony a beer, which he accepted.

Vignette 4 – no abuse, no age

Peter is a charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Vignette 5 – no abuse, 19

Peter is a 19-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Vignette 6 – no abuse, 50

Peter is a 50-year-old charity worker who lives alone. He is well-known and liked in his local community due to his regular fundraising and regular refereeing for his local football league. However, he doesn't like to socialise and spends most of his time alone. Peter has told one of the boys, Tony, from the under 14's team that he has the potential to go for trials to a nearby football academy and offered to give Tony some one to one tuition. This has been agreed with Tony's parents and, following the team training sessions, Peter and Tony stay at the sports ground and work on his football

skills. Peter is very enthusiastic when talking about the previous weeks football results, but lately Tony has noticed that Peter is bad tempered and swears because of some game results. Peter often drives Tony home after training, stopping off at the town centre and leaving him in the car whilst he disappears for a short time. He returns in a bad mood. Recently, whilst in town with his friends Tony saw Peter speaking to a man who appeared to be threatening him. Tony mentioned this at the next training session and was abruptly told by Peter to mind his own business. At the end of the training session, Peter made a joke about mistaken identities and offhandedly told Tony if anyone asks for him at the sports centre to say he's not around. After taking Tony home from training, Peter regularly asked him if he had spare change for the tunnel fees or parking, as he forgets to pick up his wallet. Tony has started to feel uncomfortable and makes excuses not to attend extra training with Peter.

Appendix H – Debrief Sheet

Thank you for taking part in this study, your participation is appreciated.

The vignette that you read was allocated to you at random and may have included information that a child was at risk of being abused. Some vignettes included this information, some did not. The aim of the study was to see if ordinary people, with potentially no specialist knowledge or experience of child abuse, could spot the signs of sexual abuse in a child, if it was present.

This study could potentially be used to clarify common misperceptions about child sexual abuse and child sex offenders and help prevent child sexual abuse by providing valuable information to aid professionals who work with children.

Please do not discuss this study with anyone else. Knowledge of the focus of the study ahead of time could potentially change a participant's responses and thus invalidate the results.

If any part of the survey has caused distress you can seek support from your GP or the Samaritans free 24h helpline on 116123. Students at the University of Chester can also contact the Wellbeing and Mental Health teams based at our Chester or Warrington campuses:

Chester – Binks 113 – wellbeing@chester.ac.uk - 01244 511550 (Ext 1550 internally)

Warrington – Martin 0.12 - Wellbeing@chester.ac.uk - 01925 534282 (Ext 4282 internally)

It is important to remember that the vignette allocated to you may not have included any signs of child sexual abuse. However, in the event that information from the study has alerted you to the behaviour of someone you know, whether they are an adult or a child, the following organisations may be able to provide you with guidance.

Stop it Now! provides support, information and resources to potential abusers, their family and friends and well as professionals involved in the lives of children. They can be contacted via a confidential email service help@stopitnow.org.uk and aim to respond to all emails within 7 working days. Alternatively, their telephone line (0808 1000 900) is open 9am-9pm Monday to Thursday and 9am-5pm on Friday.

STOPSO provides support to potential sex offenders and their family members, aimed at preventing child sexual abuse. They can be contacted via their website at <https://www.stopso.org.uk/contact/> or via telephone: 07473 299883. (They provide no information on their website regarding operating hours or response times.)

If you would like further information about the study, you can contact me, Nick Goddard (1601250@chester.ac.uk) or my supervisor, Clea Wright (clea.wright@chester.ac.uk).

Appendix I – SPSS Output

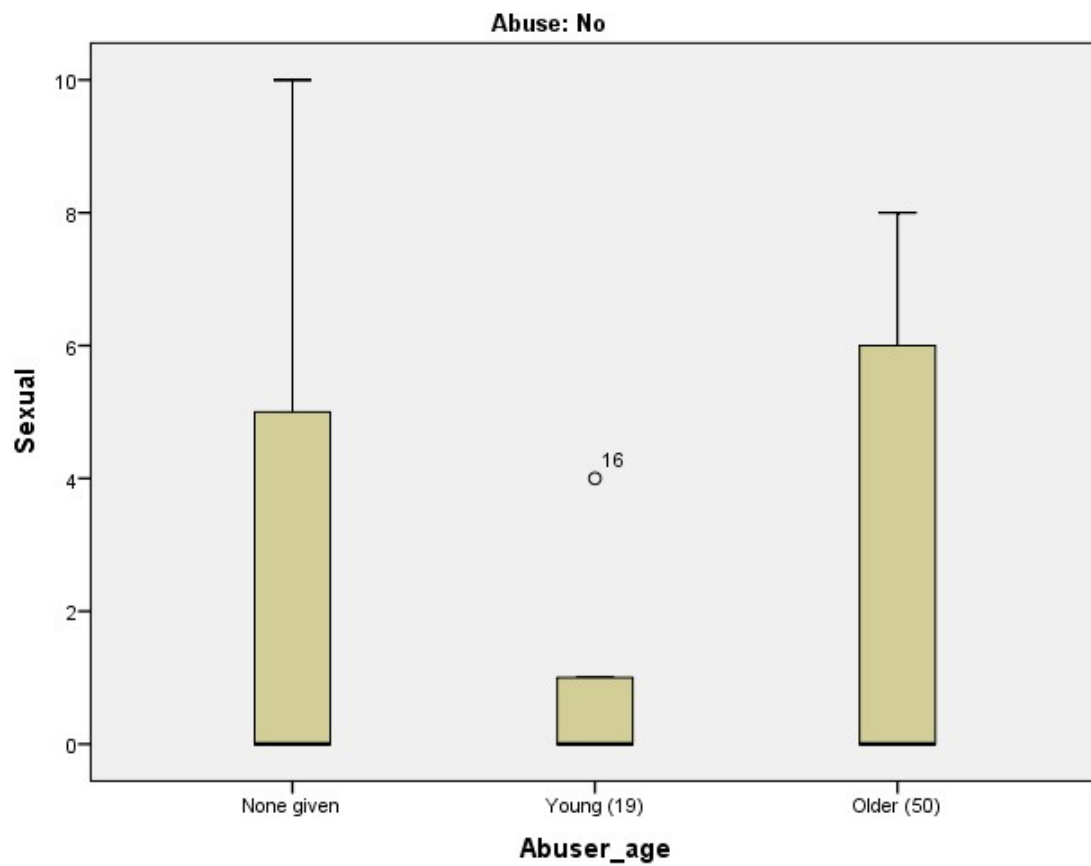
Shapiro-Wilk Test

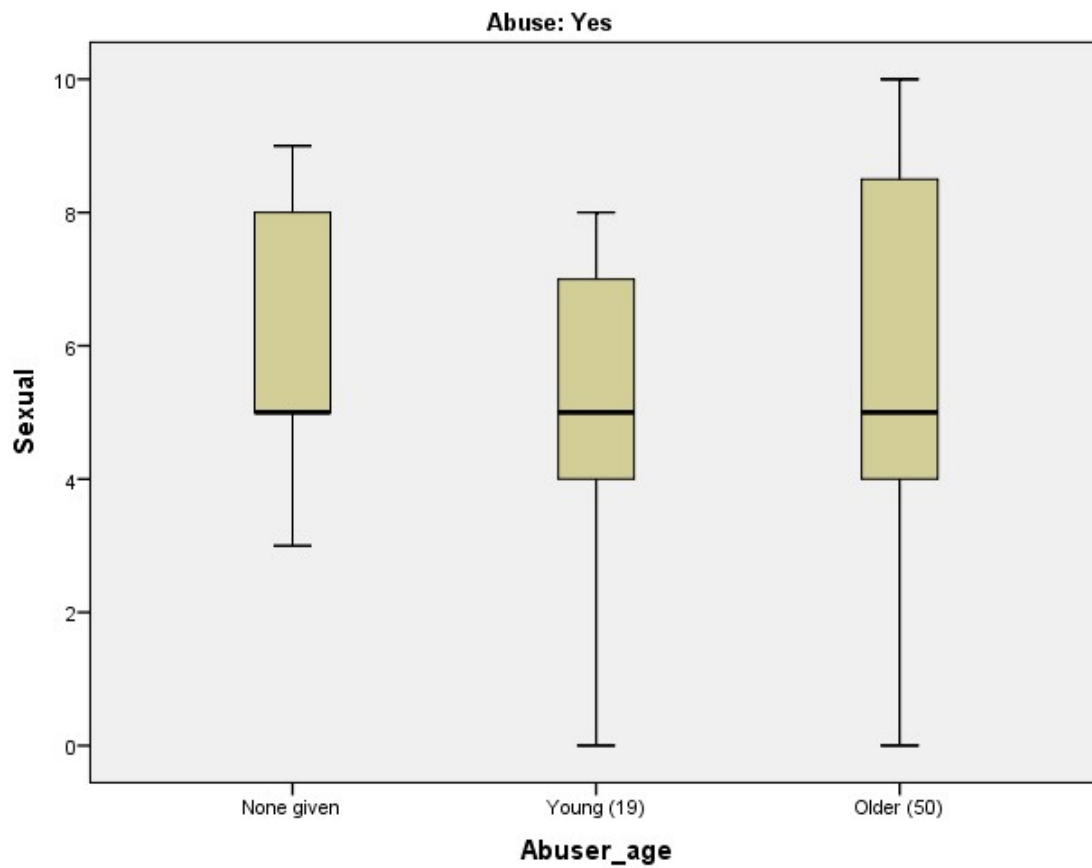
			Tests of Normality					
			Kolmogorov-Smirnov ^a			Shapiro-Wilk		
Abuse	Abuser_age		Statistic	df	Sig.	Statistic	df	Sig.
No	Sexual	None given	.311	9	.012	.753	9	.006
		Young (19)	.330	8	.010	.628	8	.000
		Older (50)	.327	9	.006	.741	9	.004
Yes	Sexual	None given	.275	9	.049	.886	9	.183
		Young (19)	.128	9	.200*	.938	9	.557
		Older (50)	.170	11	.200*	.932	11	.426

*. This is a lower bound of the true significance.

a. Lilliefors Significance Correction

Boxplots Indicating Outlier





ANOVA Output with Levene's Test and Descriptive Statistics.

Between-Subjects Factors			
		Value Label	N
Abuse	0	No	26
	1	Yes	29
Abuser_age	0	None given	18
	1	Young (19)	17
	2	Older (50)	20

Descriptive Statistics

Dependent Variable: Sexual

Abuse	Abuser_age	Mean	Std. Deviation	N
No	None given	2.44	3.539	9
	Young (19)	.75	1.389	8
	Older (50)	2.56	3.432	9
	Total	1.96	3.000	26
Yes	None given	6.22	2.108	9
	Young (19)	5.00	2.598	9
	Older (50)	5.91	2.982	11
	Total	5.72	2.576	29
Total	None given	4.33	3.430	18
	Young (19)	3.00	3.000	17
	Older (50)	4.40	3.545	20
	Total	3.95	3.347	55

Levene's Test of Equality of Error

Variances^a

Dependent Variable: Sexual

F	df1	df2	Sig.
2.384	5	49	.052

Tests the null hypothesis that the error variance of the dependent variable is equal across groups.

a. Design: Intercept + Abuse + Abuser_age + Abuse * Abuser_age

Tests of Between-Subjects Effects

Dependent Variable: Sexual

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	218.427 ^a	5	43.685	5.540	.000	.361
Intercept	792.840	1	792.840	100.539	.000	.672
Abuse	196.159	1	196.159	24.875	.000	.337
Abuser_age	23.203	2	11.601	1.471	.240	.057
Abuse * Abuser_age	1.835	2	.917	.116	.890	.005
Error	386.409	49	7.886			
Total	1461.000	55				
Corrected Total	604.836	54				

a. R Squared = .361 (Adjusted R Squared = .296)

Kruskal-Wallis H Test on Abuse IV

Descriptive Statistics

	N	Mean	Std. Deviation	Minimum	Maximum
Sexual	55	3.95	3.347	0	10
Abuse	57	.51	.504	0	1

Ranks

	Abuse	N	Mean Rank
Sexual	No	26	18.88
	Yes	29	36.17
	Total	55	

Test Statistics^{a,b}

Sexual	
Chi-Square	16.570
df	1
Asymp. Sig.	.000

a. Kruskal Wallis Test

b. Grouping Variable:
Abuse

Kruskal-Wallis H Test on Abuser Age IV

Descriptive Statistics

	N	Mean	Std. Deviation	Minimum	Maximum
Sexual	55	3.95	3.347	0	10
Abuser_age	57	1.05	.833	0	2

Ranks

	Abuser_age	N	Mean Rank
Sexual	None given	18	29.94
	Young (19)	17	23.71
	Older (50)	20	29.90
	Total	55	

Test Statistics^{a,b}

Sexual	
Chi-Square	1.835
df	2
Asymp. Sig.	.400

a. Kruskal Wallis Test

b. Grouping Variable:

Abuser_age

ANOVA Output with Levene's Test and Descriptive Statistics (DV Midpoint Values Excluded)

Between-Subjects Factors

		Value Label	N
Abuse	0	No	24
	1	Yes	22
Abuser_age	0	None given	12
	1	Young (19)	16
	2	Older (50)	18

Descriptive Statistics

Dependent Variable: Sexual

Abuse	Abuser_age	Mean	Std. Deviation	N
No	None given	1.71	3.729	7
	Young (19)	.75	1.389	8
	Older (50)	2.56	3.432	9
	Total	1.71	2.985	24
Yes	None given	7.20	2.490	5
	Young (19)	5.00	2.777	8
	Older (50)	6.11	3.296	9
	Total	5.95	2.935	22
Total	None given	4.00	4.221	12
	Young (19)	2.88	3.052	16
	Older (50)	4.33	3.742	18
	Total	3.74	3.630	46

Levene's Test of Equality of Error Variances^a

Dependent Variable: Sexual

F	df1	df2	Sig.
1.709	5	40	.155

Tests the null hypothesis that the error variance of the dependent variable is equal across groups.

a. Design: Intercept + Abuse + Abuser_age + Abuse * Abuser_age

Tests of Between-Subjects Effects

Dependent Variable: Sexual

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	236.030 ^a	5	47.206	5.292	.001	.398
Intercept	667.829	1	667.829	74.860	.000	.652
Abuse	216.737	1	216.737	24.295	.000	.378
Abuser_age	23.715	2	11.857	1.329	.276	.062
Abuse * Abuser_age	6.604	2	3.302	.370	.693	.018
Error	356.840	40	8.921			
Total	1236.000	46				
Corrected Total	592.870	45				

a. R Squared = .398 (Adjusted R Squared = .323)

Kruskal-Wallis H test on Abuse IV (DV Midpoint Values Excluded)

Descriptive Statistics

	N	Mean	Std. Deviation	Minimum	Maximum
Sexual	46	3.74	3.630	0	10
Abuse	57	.51	.504	0	1

Ranks

	Abuse	N	Mean Rank
Sexual	No	24	16.13
	Yes	22	31.55
	Total	46	

Test Statistics^{a,b}

Sexual	
Chi-Square	16.036
df	1
Asymp. Sig.	.000

a. Kruskal Wallis Test

b. Grouping Variable:
Abuse

Kruskal-Wallis H test on Abuser age IV (DV Midpoint Values Excluded)

Descriptive Statistics

	N	Mean	Std. Deviation	Minimum	Maximum
Sexual	46	3.74	3.630	0	10
Abuser_age	57	1.05	.833	0	2

Ranks

	Abuser_age	N	Mean Rank
Sexual	None given	12	24.17
	Young (19)	16	20.81
	Older (50)	18	25.44
	Total	46	

Test Statistics^{a,b}

Sexual	
Chi-Square	1.110
df	2
Asymp. Sig.	.574

a. Kruskal Wallis Test

b. Grouping Variable:
Abuser_age

t-test Output

Group Statistics						
		AbleToIdentif	N	Mean	Std. Deviation	Std. Error Mean
Abuse		y				
No	Sexual	Yes	13	2.38	3.429	.951
		No	13	1.54	2.570	.713
Yes	Sexual	Yes	15	5.40	2.261	.584
		No	12	6.17	3.099	.895

Independent Samples Test								
			Levene's Test for Equality of Variances		t-test for Equality of Means			
Abuse			F	Sig.	t	df	Sig. (2-tailed)	Mean Difference
No	Sexual	Equal variances assumed	1.801	.192	.712	24	.483	.846
		Equal variances not assumed			.712	22.247	.484	.846
Yes	Sexual	Equal variances assumed	3.271	.083	-.743	25	.464	-.767
		Equal variances not assumed			-.718	19.576	.481	-.767